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| Fill in this information to identify your case: | |
|---|-------------------------------|
| United States Bankruptcy Court for the: | |
| | |
| Northern District of: Illinois (State) | |
| Case number (if known) | Chapter you are filing under: |
| | Chapter 7 |
| | Chapter 11 |
| | Chapter 12 |
| | ✓ Chapter 13 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pá | art 1: Identify Yourself | | |
|----|---|----------------------------|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | Gregory | |
| | Write the name that is on | First name | First name |
| | your government-issued picture identification (for | Middle name | Middle name |
| | example, your driver's | Smith | |
| | license or passport | Last name | Last name |
| | Bring your picture identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. | All other names you | | |
| | have used in the last | First name | First name |
| | 8 years | | |
| | Include your married or | Middle name | Middle name |
| | maiden names. | - | |
| | | Last name | Last name |
| | | First name | First name |
| | | That have | Histiliane |
| | | Middle name | Middle name |
| | | | |
| | | Last name | Last name |
| 3. | Only the last 4 digits of your Social | XXX - XX- 0787 | xxx - xx- |
| | Security number or federal Individual | OR | OR |
| | Taxpayer Identification number (ITIN) | 9 xx - xx- | 9 xx - xx- |

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| Debtor 1 Gregory First Name | Smith Middle Name Last Name | Case number (if known) |
|--|---|--|
| | | |
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 4. Any business names and Employer | I have not used any business names or EINs. | I have not used any business names or EINs. |
| Identification Numbers (EIN) you have used in the last | Business name | Business name |
| 8 years | Business name | Business name |
| Include trade names and doing business as names | EIN | EIN |
| | EIN | EIN |
| 5. Where you live | | If Debtor 2 lives at a different address: |
| | 1434 W. 59th Street Number Street 2nd Floor | Number Street |
| | Objects 00000 | |
| | ChicagoIllinois60636CityStateZip Code | City State Zip Code |
| | Cook | |
| | County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | 1131 E 45th Street Apt 1 Number Street | Number Street |
| | Chicago Illinois 60653 | |
| | City State Zip Code | City State Zip Code |
| 6. Why you are choosing this district to file for bankruptcy | Check one: Over the last 180 days before filing this petition, I have | Check one: Over the last 180 days before filing this petition, I have |
| to file for ballkruptcy | lived in this district longer than in any other district. | lived in this district longer than in any other district. |
| | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) |
| | | |
| | | |
| | | |
| | | |

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| Debtor 1 Gregory | | | Case number (if kno | own) |
|---|--|--|--|--|
| First Name | Middle Name | Last Name | | |
| Part 2: Tell the Court Abo | out Your Bankruptcy Case | | | |
| The chapter of the Bankruptcy Code you are choosing to file under | Check one. (For a brief descrip Bankruptcy (Form B2010)). Als Chapter 7 Chapter 11 Chapter 12 Chapter 13 | | | C. § 342(b) for Individuals Filing for opriate box. |
| 8. How you will pay the fee | more details about how y cashier's check, or mone may pay with a credit car I need to pay the fee in Individuals to Pay Your I I request that my fee be judge may, but is not received the official poverty line the | you may pay. Typically, if you you may pay. Typically, if you yorder. If your attorney is so and or check with a pre-printer installments. If you choose Filing Fee in Installments (Or example waived (You may request quired to, waive your fee, and hat applies to your family six you must fill out the Application. | ou are paying the submitting your ed address. this option, sig fficial Form 103 this option only d may do so onl ze and you are u | the clerk's office in your local court for e fee yourself, you may pay with cash, payment on your behalf, your attorney in and attach the <i>Application for AA</i>). If you are filing for Chapter 7. By law, a ly if your income is less than 150% of unable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official |
| 9. Have you filed for bankruptcy within the last 8 years? | Yes. District District District | WhenWhenWhen | MM / DD / YYYY MM / DD / YYYY MM / DD / YYYY | Case number Case number Case number |
| 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | Yes. Debtor District Debtor District | <u>W</u> hen | MM / DD / YYYY | Relationship to you Case number, if known Relationship to you Case number, if known |
| 11. Do you rent your residence? | ✓ No. Go to line 1: Yes. Fill out <i>Initia</i> | | - | st You (Form 101A) and file it with |

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Smith Debtor 1 Gregory __ Case number (if known) Middle Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. **|** For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have **V** No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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Debtor 1 Gregory Smith Case number (ifknown) First Name Middle Name Last Name

| Pa | rt 5: Explain Your Effor | rts to Receive a Brie | fing About Credit Counseling | | | | |
|-----|--|---|--|--|---|---|--|
| | | About Debtor 1: | | About | Debtor 2 (Sp | oouse Only in a Joint Case): | |
| 15. | Tell the court | You must check one: | | You m | ust check one: | | |
| | whether you have received briefing about credit counseling. | counseling agen | ing from an approved credit icy within the 180 days before I ptcy petition, and I received a npletion. | co | unseling ager | ing from an approved credit ncy within the 180 days before I optcy petition, and I received a npletion. | |
| | The law requires that you receive a briefing | | he certificate and the payment plan, veloped with the agency. | | | he certificate and the payment plan, veloped with the agency. | |
| | about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file. | counseling agen | ing from an approved credit acy within the 180 days before I ptcy petition, but I do not have a appletion. | co | unseling ager | ing from an approved credit ncy within the 180 days before I ptcy petition, but I do not have a npletion. | |
| | | | er you file this bankruptcy petition, opy of the certificate and payment | you | | er you file this bankruptcy petition, opy of the certificate and payment | |
| | If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your | from an approve obtain those ser made my reques | ked for credit counseling services ad agency, but was unable to vices during the 7 days after I t, and exigent circumstances emporary waiver of the | fro ob ma me | m an approve tain those se ade my reques | ked for credit counseling services ed agency, but was unable to vices during the 7 days after I st, and exigent circumstances emporary waiver of the | |
| | creditors can begin collection activities again. | requirement, attac efforts you made t unable to obtain it | ay temporary waiver of the ch a separate sheet explaining what to obtain the briefing, why you were before you filed for bankruptcy, and imstances required you to file this | rec effo una | quirement, attao orts you made able to obtain it at exigent circu | ay temporary waiver of the ch a separate sheet explaining what to obtain the briefing, why you were t before you filed for bankruptcy, and umstances required you to file this | |
| | | with your reasons | Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. | | Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. | | |
| | | receive a briefing must file a certifica with a copy of the | fied with your reasons, you must still within 30 days after you file. You ate from the approved agency, along payment plan you developed, if any. o, your case may be dismissed. | receive a briefir must file a certif with a copy of tl | | sfied with your reasons, you must still within 30 days after you file. You ate from the approved agency, along payment plan you developed, if any. o, your case may be dismissed. | |
| | | • | he 30-day deadline is granted only mited to a maximum of 15 days. | | , | he 30-day deadline is granted only mited to a maximum of 15 days. | |
| | | I am not required counseling beca | d to receive a briefing about credit use of: | | I am not required to receive a briefing counseling because of: | | |
| | | Incapacity. | I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. | | Incapacity. | I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. | |
| | | Disability. | My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so. | | Disability. | My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so. | |
| | | Active duty. | I am currently on active military duty in a military combat zone. | | Active duty. | I am currently on active military duty in a military combat zone. | |
| | | about credit coun | are not required to receive a briefing seling, you must file a motion for punseling with the court. | ab | out credit cour | are not required to receive a briefing seling, you must file a motion for ounseling with the court. | |

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Smith Debtor 1 Gregory Case number (if known) Middle Name Last Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? **7** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do you estimate that 100-199 10,001-25,000 More than 100,000 you owe? 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your liabilities to be? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Gregory Smith Signature of Debtor 1 Signature of Debtor 2 Executed on _ 1/5/2018 Executed on MM / DD / YYYY MM / DD / YYYY

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| Debtor 1 Gregory | | Smith | Case number (if k | nown) |
|--|---------------------------|--------------------------|-----------------------------|--|
| First Name | Middle Name | Last Name | | |
| For your attorney, if you are represented by one | eligibility to proceed un | der Chapter 7, 11, 12, | , or 13 of title 11, United | ave informed the debtor(s) about I States Code, and have explained the so certify that I have delivered to the |
| If you are not | debtor(s) the notice requ | uired by 11 U.S.C. § 3 | 342(b) and, in a case in w | hich § 707(b)(4)(D) applies, certify that I |
| represented by an | have no knowledge after | r an inquiry that the ir | nformation in the schedu | ules filed with the petition is incorrect. |
| attorney, you do not | · · | | | · |
| need to file this page. | /s/ Megan Holmes | | Date | 1/5/2018 |
| | Signature of Attorney | for Debtor | MI | M / DD / YYYY |
| | g | | | |
| | | | | |
| | Megan Holmes | | | |
| | Printed name | | | |
| | | | | |
| | Semrad Law Firm | | | |
| | Firm name | | | |
| | 11101 S. Western Ave | enue | | |
| | Street | | | |
| | | | | |
| | | | | |
| | Chicago | | Illinois | 60643 |
| | City | | State | Zip Code |
| | 0 | | | |
| | Contact phone | 3128374019 | Email address | mholmes@semradlaw.com |
| | | | | |
| | | | Illinois | |
| | Bar number | | State | |

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| Fill in this information to identify your case: | | | | | | | | |
|---|---------------------------|-------------|----------------------|--|--|--|--|--|
| Debtor 1 | Gregory | | Smith | | | | | |
| | First Name | Middle Name | Last Name | | | | | |
| Debtor 2 | | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois | | | | | |
| Case number (If known) | | | (State) | | | | | |

| | Check if | this | is | an |
|---|----------|---------|----|----|
| _ | amende | d filii | ng | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Part 1: Summarize Your Assets | |
|---|---|
| | Your assets Value of what you own |
| . Schedule A/B: Property (Official Form 106A/B) | \$0.00 |
| 1a. Copy line 55, Total real estate, from Schedule A/B | Ψ0.00 |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$2,946.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$2,946.00 |
| Part 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$2,000.00 |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) | \$0.00 |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$32,187.23 |
| Your total liabilities | \$34,187.23 |
| Part 3: Summarize Your Income and Expenses | |
| Canmaria Foal moemo ana Exponess | |
| 4. Schedule I: Your Income (Official Form 106I) | \$3,371.72 |
| Copy your combined monthly income from line 12 of Schedule I | |
| | |
| 5. Schedule J: Your Expenses (Official Form 106J) | \$2,771.00 |

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| Debt | or 1 | Gregory | | Smith | Case number (if known) | |
|---------------|--|--|-------------------------------|-------------------------------|--|------------|
| Dest | 4 | First Name | Middle Name | Last Name | auda | |
| Part 4 | ‡ : | Answer These Question | is for Administrativ | ve and Statistical Rec | oras | |
| 6. A r | re yo | u filing for bankruptcy und | er Chapters 7, 11, or | 13? | | |
| | N | o. You have nothing to repor | t on this part of the for | m. Check this box and sub | mit this form to the court with your other sche | edules. |
| - □ | _ / Ye | es. | | | | |
| 7 W | bat I | rind of dobt do you house? | | | | |
| 7. W | | kind of debt do you have? | | | | |
| _ | | | | | d by an individual primarily for a personal, al purposes. 28 U.S.C. § 159. | |
| Г | 7 Y | our debts are not primarily | consumer debts. You | u have nothing to report on | this part of the form. Check this box and sub | omit |
| | ┛ th | is form to the court with you | r other schedules. | | | |
| | | the Statement of Your Cur | | | onthly income from Official | \$5,360.82 |
| F | orm | 122A-1 Line 11; OR , Form | 122B Line 11; OR , For | rm 122C-1 Line 14. | | |
| 9. | Сор | y the following special cat | egories of claims fror | m Part 4, line 6 of Schedu | ıle E/F: | |
| | From Part 4 on Schedule E/F, copy the following: | | | | Total claim | |
| | 9a. [| Domestic support obligations | (Copy line 6a.) | | \$0.00 | |
| | 9b. ⁻ | Taxes and certain other debts | s you owe the governm | nent. (Copy line 6b.) | \$0.00 | |
| | 9c. (| Claims for death or personal i | njury while you were in | ntoxicated. (Copy line 6c.) | \$0.00 | |
| | 9d. \$ | Student loans. (Copy line 6f.) | | | \$0.00 | |
| | | e. Obligations arising out of a separation agreement or di | | divorce that you did not re | port as \$0.00 | |
| | 9f. C | Debts to pension or profit-sha | aring plans, and other s | similar debts. (Copy line 6h. | \$0.00 | |
| | | | | | | |

\$0.00

9g. Total. Add lines 9a through 9f.

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| Fill in this | inforn | nation to identify your c | ase: | | | | | |
|--|------------------------|---|--|----------------------|--|--|--|--|
| Debtor 1 | | Grogony | | | Smith | | | |
| Debtor I | | Gregory First Name | Middle N | Name | Last Name | • | | |
| Debtor 2 (Spouse, if fil | ing) | First Name | Middle N | Jame | Last Name | <u> </u> | | |
| United Sta | ates Ba | ankruptcy Court for the: | Northern | • | District of Illinois | | | |
| Case num | | annuprey countries and | | | (State | | | |
| (If known) | | | | | | , | | Charle if this is an |
| Officia | ıl Fo | orm 106A/B | | | | | | Check if this is an amended filing |
| Sched | dul | e A/B: Prope | rty | | | | | 12/1 |
| category v responsibl write your | where e for name | you think it fits best. E | Be as complete a mation. If more s nown). Answer e | nd a pace very | ccurate as possible. I is needed, attach a question. | If two married people separate sheet to thi | han one category, list the are filing together, both a s form. On the top of any | are equally |
| | | | · | | | | | |
| 1. D0 y00 | | or have any legal or ed So to Part 2 | quitable iliterest | III ai | y residence, building | , iailu, or sillilar prop | erty: | |
| | Yes | Where is the property? | | | | | | |
| 1.1 | | t address, if available, or | other description | Wh | at is the property? C Single-family home | | the amount of any secu | claims or exemptions. Put ured claims on Schedule D: aims Secured by Property. |
| | | , | · | | Duplex or multi-unit b Condominium or coo | · · | Current value of the | Current value of the |
| | | | | H | Manufactured or mob | • | entire property? | portion you own? |
| | Num | ber Street | | | Land | | Describe the nature of | f your ownership |
| | 1401111 | ooi oiioot | | | Investment property Timeshare | | interest (such as fee s the entireties, or a life | simple, tenancy by |
| | City | State | Zip Code | | Other | | —————————————————————————————————————— | e estate), ii kilowii. |
| | | | | Wh | o has an interest in t | he property? Check | Check if this is co (see instructions) | ommunity property |
| | | | | | Debtor 1 only | | Ш | |
| | | | | | Debtor 2 only | | | |
| | | | | | Debtor 1 and Debtor 2 | • | | |
| | | | | L | At least one of the deb | | | |
| | | | | | perty identification r | vish to add about this number <u>:</u> | item, such as local | |
| If you | own c | or have more than one, li | st here: | | | | | |
| 1.2 | | | | Wh | at is the property? C | heck all that apply. | | claims or exemptions. Put ured claims on <i>Schedule D:</i> |
| 1.2 | Stree | t address, if available, or | other description | H | Single-family home Duplex or multi-unit b | uildina | Creditors Who Have Cla | aims Secured by Property. |
| | | | | H | Condominium or coo | · · | Current value of the | Current value of the |
| | | | | | Manufactured or mob | - | entire property? | portion you own? |
| | Num | ber Street | | | Land | | Describe the nature of | f your ownership |
| | | | | | Investment property Timeshare | | interest (such as fee s | simple, tenancy by |
| | City | State | Zip Code | | Other | | the entireties, or a life | e estate), ii known. |
| | | | | Wh | o has an interest in t Э. | he property? Check | Check if this is co (see instructions) | ommunity property |
| | | | | L | Debtor 1 only | | | |
| | | | | | Debtor 2 only | N | | |
| | | | | | Debtor 1 and Debtor 2 | • | | |
| | | | | L | At least one of the deb | | | |
| | | | | | ner information you w perty identification r | vish to add about this number: | item, such as local | |

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| Debtor 1 | | | Smith | _ Case numbe | r (if known) | |
|--|---|--|--|-----------------|--|---|
| | First Name | Middle Name | Last Name | | | |
| | et address, if available, or othe | | /hat is the property? Check all that an Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land | oply. | the amount of any secu | claims or exemptions. Put red claims on Schedule D: ims Secured by Property. Current value of the portion you own? |
| Nun City | nber Street State | Zip Code | Investment property Timeshare Other | - | Describe the nature or interest (such as fee s the entireties, or a life | imple, tenancy by |
| | | | The has an interest in the property? Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anotether information you wish to add also | her | Check if this is co (see instructions) such as local | mmunity property |
| | the dollar value of the port ve attached for Part 1. Writ | ion you own for a | roperty identification number: Il of your entries from Part 1, includere. | ling any entrie | s for pages | |
| Do you ow you own th 3. Cars, va | nat someone else drives. If youns, trucks, tractors, sport utili | quitable interest ou lease a vehicle, a | in any vehicles, whether they are realso report it on Schedule G: Executory ycles | - | - | |
| 3.1 | Make | Mercury Mountaineer | Who has an interest in the prope one. | erty? Check | the amount of any secu | claims or exemptions. Put ured claims on <i>Schedule D:</i> |
| | Model: Year: Approximate mileage: Other information: 2002 Mercury Mountaineer | 2002 177000 | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this is community p instructions) | | Current value of the entire property? \$1800.00 | Current value of the portion you own? |
| 3.2 | Make Model: Year: | | Who has an interest in the prope one. Debtor 1 only | erty? Check | the amount of any secu | claims or exemptions. Put ured claims on <i>Schedule D:</i> aims Secured by Property. |
| | Approximate mileage: Other information: | | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this is community p | | Current value of the entire property? | Current value of the portion you own? |
| | | | instructions) | | | |

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| | Gregory First Name | Middle Name | Smith Last Name | Case number | | |
|------|---|-------------|---|--|---|---|
| 0.0 | | | | | D I d. d I | .l.' |
| 3.3 | Make Model: | | Who has an interest in the pone. | property? Check | Do not deduct secured the amount of any secu | • |
| | Year: | | Debtor 1 only | | | nims Secured by Property |
| | Approximate mileage: | | | | | , , , |
| | | | Debtor 2 only | | Current value of the | Current value of the |
| | Other information: | | Debtor 1 and Debtor 2 on | ıly | entire property? | portion you own? |
| | | | At least one of the debtors | s and another | | |
| | | | Check if this is commur | nity property (see | | |
| | | | instructions) | | | |
| 3.4 | Make | | Who has an interest in the | property? Check | | claims or exemptions. P |
| | Model: | | one. | | the amount of any secu | |
| | Year: | | Debtor 1 only | | Creditors vvno Have Cia | ims Secured by Property |
| | Approximate mileage: | | Debtor 2 only | | Current value of the | Current value of the |
| | Other information: | | Debtor 1 and Debtor 2 on | ıly | entire property? | portion you own? |
| | | | At least one of the debtors | s and another | | |
| | | | Check if this is commur | nity property (see | | |
| | | | instructions) | | | |
| Exar | nples: Boats, trailers, motors No | • | er recreational vehicles, other t, fishing vessels, snowmobiles, r | • | | |
| Exar | nples: Boats, trailers, motors No Yes | • | | motorcycle accessori | Do not deduct secured the amount of any secu | red claims on <i>Schedule</i> |
| Exar | nples: Boats, trailers, motors No Yes Make | • | t, fishing vessels, snowmobiles, r Who has an interest in the p | motorcycle accessori | Do not deduct secured the amount of any secu | |
| Exar | nples: Boats, trailers, motors No Yes Make Model: | • | t, fishing vessels, snowmobiles, r Who has an interest in the pone. | motorcycle accessori | Do not deduct secured the amount of any secu | red claims on <i>Schedule</i> |
| Exar | nples: Boats, trailers, motors No Yes Make Model: Year: | • | t, fishing vessels, snowmobiles, r Who has an interest in the pone. Debtor 1 only | motorcycle accessori property? Check | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule ims Secured by Property |
| Exar | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: | • | who has an interest in the pone. Debtor 1 only Debtor 2 only | motorcycle accessori property? Check | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule hims Secured by Property Current value of the |
| Exar | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: | • | who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtors | motorcycle accessori property? Check hly s and another | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule hims Secured by Property Current value of the |
| Exar | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: | • | t, fishing vessels, snowmobiles, r Who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on | motorcycle accessori property? Check hly s and another | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule hims Secured by Property Current value of the |
| 4.1 | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: | • | who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtors Check if this is communication. | motorcycle accessori property? Check hly s and another nity property (see | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule ims Secured by Property Current value of the portion you own? |
| 4.1 | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: | • | who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtors Check if this is communinstructions) | motorcycle accessori property? Check hly s and another nity property (see | Do not deduct secured the amount of any secu Creditors Who Have Cla Current value of the entire property? Do not deduct secured the amount of any secu | red claims on Schedule hims Secured by Property Current value of the portion you own? claims or exemptions. Pared claims on Schedule |
| 4.1 | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: | • | who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtors Check if this is communinstructions) Who has an interest in the pone. | motorcycle accessori property? Check hly s and another nity property (see | Do not deduct secured the amount of any secu Creditors Who Have Cla Current value of the entire property? Do not deduct secured the amount of any secu | red claims on Schedule hims Secured by Property Current value of the portion you own? claims or exemptions. P hered claims on Schedule |
| 4.1 | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: | • | who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtors Check if this is communinstructions) Who has an interest in the pone. | motorcycle accessori property? Check hly s and another nity property (see | Do not deduct secured the amount of any secu Creditors Who Have Cla Current value of the entire property? Do not deduct secured the amount of any secu | red claims on Schedule hims Secured by Property Current value of the portion you own? claims or exemptions. P |
| 4.1 | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: | • | who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtors Check if this is communinstructions) Who has an interest in the pone. Debtor 1 only | property? Check hly s and another hity property (see property? Check | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Classifications | red claims on Schedule lims Secured by Property Current value of the portion you own? claims or exemptions. P lired claims on Schedule lims Secured by Property |
| 4.1 | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: | • | Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtors Check if this is communinstructions) Who has an interest in the pone. Debtor 1 only Debtor 2 only | property? Check hly s and another hity property (see property? Check | Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the | red claims on Schedule ims Secured by Property Current value of the portion you own? claims or exemptions. Pured claims on Schedule ims Secured by Property Current value of the |
| 4.1 | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: | • | who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtors Check if this is communinstructions) Who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only | property? Check The property of the property? Check The property of the property? Check The property? Check The property of the property? The property? The property? The property of the property? The property | Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the | red claims on Schedule ims Secured by Property Current value of the portion you own? claims or exemptions. Pured claims on Schedule ims Secured by Property Current value of the |

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Smith Debtor 1 Gregory Case number (if known) Middle Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... TV, Cell Phone \$400.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections, other collections, memorabilia, collectibles Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... Misc. Men's Clothing \$200.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... Misc. \$10.00 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$610.00 for Part 3. Write that number here

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Smith Debtor 1 Gregory Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: Bank of America \$536.00 17.1. Checking account: 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture % of ownership: Name of entity Yes. Give specific information about

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| Deb ⁻ | tor 1 Gregory | Middle Norman | Smith | Case number (if known) | |
|------------------|--|--|--------------------------------|---|---|
| | First Name | Middle Name | Last Name | | |
| 20. | | orate bonds and other negotia | | | |
| | | include personal checks, cashiers ents are those you cannot transfe | | | |
| | ✓ No | , | , 5 | | |
| | Yes. Give specific | | | | |
| | information about | Issuer name: | | | |
| | them | | | | |
| | | | | | _ |
| | | | | | _ |
| | | | | | |
| 21. | Retirement or pension | | | | |
| | Examples: Interests in If | RA, ERISA, Keogh, 401(k), 403(b |), thrift savings accounts | s, or other pension or profit-sharing plans | |
| | ✓ No | Type of account: | Institution name: | | |
| | Yes. List each account | | mondation name. | | |
| | separately. | 401(k) or similar plan: | - | | _ |
| | | Pension plan: | | | |
| | | IRA: | | | _ |
| | | Retirement account: | | | |
| | | Keogh: | | | _ |
| | | Additional account: | _ | | - |
| | | Additional account: | | | _ |
| 22 | Security deposits and | nrenavments | - | | |
| | Your share of all unused | d deposits you have made so that | | | |
| | Examples: Agreements of companies, or others | with landlords, prepaid rent, publ | ic utilities (electric, gas, w | vater), telecommunications | |
| | No | | Institution name: | | |
| | Yes | | | | |
| | 163 | Electric: | | | |
| | | Gas: | | | _ |
| | | Heating oil: | | | |
| | | Security deposit on rental unit: | | | _ |
| | | Prepaid rent: | | | |
| | | Telephone: | | | _ |
| | | Water: | | | |
| | | Rented furniture: | | | |
| | | Other: | | | |
| 23. | Annuities (A contract fo | or a periodic payment of money to | o you, either for life or fo | r a number of years) | - |
| | ✓ No | | | | |
| | Yes | Issuer name and description: | | | |
| | _ | | | | |
| | | | · | | |
| | | | | | _ |
| | | | | | |

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| Debt | or 1 Gregory | Smith Case number | (if known) | |
|------|---|---|--|---|
| 0.4 | First Name | Middle Name Last Name | | |
| 24. | | an education IRA, in an account in a qualified ABLE program, or under a qualified sta 530(b)(1), 529A(b), and 529(b)(1). | te tuition program. | |
| | ✓ No Yes | Institution name and description. Separately file the records of any interests.11 U.S.C. § 52 | 1(c): | |
| | | | | |
| | | | | |
| 25. | | table or future interests in property (other than anything listed in line 1), and rights on for your benefit | r powers | |
| | ✓ No Yes. Desc | oviho. | | |
| | L Tes. Desc | Cilde | | |
| 26. | | byrights, trademarks, trade secrets, and other intellectual property ternet domain names, websites, proceeds from royalties and licensing agreements | | |
| | No No | terriet domain frames, websites, proceeds from royaltes and illerising agreements | | |
| | Yes. Desc | cribe | | |
| 27. | Licenses, fra | anchises, and other general intangibles | | |
| | | uilding permits, exclusive licenses, cooperative association holdings, liquor licenses, profession | onal licenses | |
| | ✓ No Yes. Desc | cribe | | |
| | | | | |
| | | | | |
| Mor | ney or proper | rty owed to you? | , | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | ney or proper | | , | portion you own? Do not deduct secured |
| | Tax refunds on No | owed to you | F C | portion you own? Do not deduct secured |
| | Tax refunds on ✓ No Yes. Give s abou | specific information ut them, including whether | ederal: | portion you own? Do not deduct secured claims or exemptions. |
| | Tax refunds on No Yes. Give s about your | specific information ut them, including whether already filed the returns the tax years | ederal: <u>\$</u> | portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds on No Yes. Give s about you a and t | specific information ut them, including whether already filed the returns the tax years | rederal: <u>\$</u> State: <u>\$</u> .ocal: <u>\$</u> | portion you own? Do not deduct secured claims or exemptions. 60.00 |
| 28. | Tax refunds on No Yes. Give s about you a and t | specific information ut them, including whether already filed the returns the tax years | federal: \$\frac{\sqrt{\sq}}}}}}}}}} \scrt{\sq}}}}}}}}} \sqrt{\sq}}}}}}}}} \sqrt{\sqrt{\sqrt{\sqrt{\sq}}}}}}}} \end{\sqrt{\sq}}}}} \end{\sqrt{\sqrt{\sqrt{\sqrt{\sq}}}}}}} \end{\sqrt{\sqrt{\sqrt{\sq}}}}}}} \end{\sqrt{\sqrt{\sq}}}}}}} \sqrt{\sqrt{\sq | portion you own? Do not deduct secured claims or exemptions. 60.00 60.00 60.00 |
| 28. | Tax refunds on ✓ No Yes. Give s about you a and t Family support Examples: Past | specific information ut them, including whether already filed the returns the tax years | rederal: \$\frac{\sqrt{1}}{2}\$ State: \$\frac{\sqrt{2}}{2}\$ Ocal: \$\frac{\sqrt{2}}{2}\$ It, property settlement Simony: \$\frac{\sqrt{2}}{2}\$ | portion you own? Do not deduct secured claims or exemptions. 60.00 60.00 60.00 |
| 28. | Tax refunds on ✓ No Yes. Give s about you a and t Family support Examples: Past | specific information ut them, including whether already filed the returns the tax years | rederal: \$\frac{\\$}{2}\$ State: \$\frac{\\$}{2}\$ Stocal: \$\frac{\\$}{2}\$ It, property settlement Ulimony: \$\frac{\\$}{2}\$ Maintenance: \$\frac{\\$}{2}\$ | portion you own? Do not deduct secured claims or exemptions. 80.00 80.00 80.00 80.00 |
| 28. | Tax refunds on ✓ No Yes. Give s about you a and t Family support Examples: Past | specific information ut them, including whether already filed the returns the tax years Int st due or lump sum alimony, spousal support, child support, maintenance, divorce settlement specific information | Federal: State: | portion you own? Do not deduct secured claims or exemptions. 60.00 60.00 60.00 60.00 60.00 |
| 28. | Tax refunds on ✓ No Yes. Give s about you a and t Family support Examples: Past | specific information ut them, including whether already filed the returns the tax years Int st due or lump sum alimony, spousal support, child support, maintenance, divorce settlement specific information | rederal: \$\frac{\sqrt{\sq}}}}}}}}} \sqrt{\sq}}}}}}}}}} \sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sq}}}}}}}}} \sqrt{\sqrt{\sqrt{\sq}}}}}}} \sqrt{\sqrt{\sqrt{\sq}}}}}}} \sqrt{\sqrt{\sqrt{\sq}}}}}}} \sqrt{\sqrt{\sqrt{\sq}\si | portion you own? Do not deduct secured claims or exemptions. 60.00 60.00 60.00 60.00 60.00 60.00 60.00 |
| 28. | Tax refunds on No Yes. Give s about you a and t Family suppor Examples: Past No Yes. Give s Other amount | specific information ut them, including whether already filed the returns the tax years | rederal: State: Stat | portion you own? Do not deduct secured claims or exemptions. 60.00 60.00 60.00 60.00 60.00 |
| 28. | Tax refunds on ✓ No Yes. Give s about you a and t Family suppor Examples: Past ✓ No Yes. Give s Other amount Examples: Unp | specific information ut them, including whether already filed the returns the tax years | rederal: State: Stat | portion you own? Do not deduct secured claims or exemptions. 60.00 60.00 60.00 60.00 60.00 60.00 60.00 |
| 28. | Tax refunds on ✓ No ✓ Yes. Give s about you a and t Family suppor Examples: Past ✓ No ✓ Yes. Give s Other amount Examples: Unp Soc | specific information ut them, including whether already filed the returns the tax years | rederal: State: Stat | portion you own? Do not deduct secured claims or exemptions. 60.00 60.00 60.00 60.00 60.00 60.00 60.00 |
| 28. | Tax refunds on No Yes. Give s about you a and t Family suppor Examples: Past No Yes. Give s Other amount Examples: Unp Soc | specific information ut them, including whether already filed the returns the tax years | rederal: State: Stat | portion you own? Do not deduct secured claims or exemptions. 60.00 60.00 60.00 60.00 60.00 60.00 60.00 |

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| Debt | or 1 Gregory | | Smith | Case number (if known) | |
|------|--|---------------------------|--|---|--|
| | First Name | Middle Name | e Last Name | | |
| 31. | Interests in insurance p Examples: Health, disabili | | ealth savings account (HSA); credit, | homeowner's, or renter's insurance | |
| | Yes. Name the insura of each policy and lis | | Company name: | Beneficiary: | Surrender or refund value |
| 32. | Any interest in property If you are the beneficiary of property because someon No Yes. Describe | of a living trust, expect | | cy, or are currently entitled to receive | |
| 33. | | | you have filed a lawsuit or made surance claims, or rights to sue | a demand for payment | |
| 34. | Other contingent and u to set off claims No Yes. Describe | nliquidated claims o | f every nature, including counter | claims of the debtor and rights | |
| 35. | Any financial assets you No Yes. Describe | u did not already list | | | |
| 36. | | - | m Part 4, including any entries f | | \$536.00 |
| Part | | | | nterest In. List any real estate in P | art 1. |
| 37. | No. Go to Part 6. Yes. Go to line 38. | legal or equitable II | nterest in any business-related p | roperty? | Current value of the portion you own? Do not deduct secured claims or exemptions |
| 38. | Accounts receivable or | commissions you al | ready earned | | |
| | Yes. Describe | | | | |
| 39. | Office equipment, furnis Examples: Business-relate | | e, modems, printers, copiers, fax m | achines, rugs, telephones, desks, chairs, e | lectronic devices |
| | No Yes. Describe | | | | |
| | | | | | |

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| Deb | tor 1 Gregory | | ase number (if known) | |
|--------|---------------------------------------|--|-------------------------|------------------------------|
| 1.0 | First Name | Middle Name Last Name | | |
| 40. | Machinery, fixtures, equ | uipment, supplies you use in business, and tools of your trade | | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | | | | |
| | 1 | | | |
| 41. | Inventory | | | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | | | | |
| 40 | | | | |
| 42. | Interests in partnership | s or joint ventures | | |
| | ✓ No | Name of entity: | % of ownership: | |
| | Yes. Give specific | ivalite of entity. | 70 Of Ownership. | |
| | information about them | | | <u> </u> |
| | шеш | | | |
| | | | | |
| 40 | | | | _ |
| 43. 0 | Customer lists, mailing li | sts, or other compilations | | |
| | ✓ No | | | |
| | Yes. Do your lists inc | clude personally identifiable information (as defined in 11 U.S.C. § 101 | I(41A))? | |
| | — No | | | |
| | No No | | | |
| | Yes. Describ | ·e | | |
| 44. | Any business-related pr | roperty you did not already list | | |
| | — | , | | |
| | No | | | <u> </u> |
| | Yes. Give specific information | | | |
| | imormation | | | _ |
| | | | | _ |
| | | | | |
| | | | | |
| | | | | _ |
| | | | | |
| | | | | |
| | | of your entries from Part 5, including any entries for pages you | | |
| for Pa | art 5. Write that number | here | | |
| Part | Describe Any Far | m- and Commercial Fishing-Related Property You Own | or Have an Interest In. | |
| Fart | | nterest in farmland, list it in Part 1. | | |
| 46. | Do you own or have any | y legal or equitable interest in any farm- or commercial fishing-r | related property? | |
| 10. | | riogai oi oquitabio interest in any larini oi ooninierolar noming i | Siated property: | Current value of the |
| | No. Go to Part 7. | | | portion you own? |
| | Yes. Go to line 47. | | | Do not deduct secured claims |
| 47 | Farm animala | | | or exemptions |
| 47. | Farm animals Examples: Livestock, pou | ultrv. farm-raised fish | | |
| | <u> </u> | · M · · · · · · · · · · · · · · · · · · | | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | | | | |

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| Debto | or 1 Gregory First Name | | Smith Last Name | Case number (if known) | |
|----------------|--------------------------------|---|----------------------------|------------------------------|-------------|
| 48. | Crops-either growing | | | | |
| | ✓ No Yes. Describe | | | | |
| 49. | Farm and fishing equip | oment, implements, machinery, fixtur | es, and tools of trade | | |
| | ✓ No Yes. Describe | | | | |
| | | | | | |
| 50. | Farm and fishing supp | lies, chemicals, and feed | | | |
| | ✓ No Yes. Describe | | | | |
| | Tes. Describe | | | | |
| 51. | Any farm- and comme | rcial fishing-related property you did | not already list | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | I of your entries from Part 6, includin | g any entries for pages yo | ou have attached | |
| | | | | | |
| | | | | | |
| Part 7 | | perty You Own or Have an Intere | | t List Above | |
| | | oerty of any kind you did not already l s, country club membership | iist: | | |
| | ✓ No | | | | |
| | Yes. Give specific information | | | | |
| | | | | | |
| 54 Ac | ld the dellar value of a | l of your entries from Part 7. Write th | at number bere | , | • |
| 54. AU | id the donar value of a | r or your entries from Part 7. Write th | at number here | | |
| | | | | | |
| | | | | | |
| Part 8 | List the Totals of | Each Part of this Form | | | |
| | | , line 2 | | > | |
| 56. p | art 2 total vehicles, lin | e 5 | ¢1800.00 | | |
| - | | nd household items, line 15 | \$1800.00 \$610.00 | | |
| 58. P a | art 4: Total financial as | sets, line 36 | \$536.00 | | |
| 59. P | art 5: Total business-r | elated property, line 45 | ψοσο.σο | | |
| 60. P | art 6: Total farm- and | ishing-related property, line 52 | | | |
| 61. P | art 7: Total other prop | erty not listed, line 54 | | | |
| 62. T | otal personal property | Add lines 56 through 61. | \$2946.00 | Copy personal property total | + \$2946.00 |
| | | | | 191 1919 | \$2946.00 |
| 63. T c | otal of all property on S | schedule A/B. Add line 55 + line 62 | | | Ψ2340.00 |

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| | | | | Docu | ment Page 20 | of 72 | |
|--------------------|---|---|---|---|---|---|---|
| Fill | in this inforr | mation to identify your | case: | | | | |
| Del | otor 1 | Gregory | | | Smith | | |
| | | First Name | | Middle Name | Last Name | _ | |
| | otor 2 ouse, if filing) | First Name | | Middle Name | Last Name | - | |
| Uni | ted States B | ankruptcy Court for the | : Northe | rn D | District of Illinois | | |
| | se number | | | | (State) | - | |
| O | fficial | Form 106C | | | | | Check if this is an amended filing |
| Sc | hedule | C: The Pro | perty | You Claim a | s Exempt | | 04/16 |
| For state the tax- | each iten te a specifiamount o exempt re ler a law t r exempti t1: Iden Which set | Ising the property you nore space is neede les, write your name of property you clic dollar amount as f any applicable state at limits the exemple on would be limited tify the Property You of exemptions are your claiming state and are claiming federal exemptions. | ou listed d, fill out e and cas e aim as e s exemp atutory li may be u ption to d to the a ou Claim u claimin federal necemptions | on Schedule A/B: t and attach to this t and attach to this e number (if known exempt, you must st. Alternatively, you mit. Some exempt inlimited in dollar a particular dollar applicable statutor as Exempt 19? Check one only, exonbankruptcy exempt 11 U.S.C. § 522(b)(c) | Property (Official Form 1 page as many copies of). specify the amount of the may claim the full failtions—such as those for amount. However, if you amount and the value by amount. The if your spouse is filing what the specified in the specific parts of the specific parts. | o6A/B) as your sou Part 2: Additional F the exemption you or market value of the rhealth aids, rights a claim an exemption of the property is distinct the you. | nsible for supplying correct ree, list the property that you claim Page as necessary. On the top of any claim. One way of doing so is to be property being exempted up to so to receive certain benefits, and on of 100% of fair market value determined to exceed that amount, |
| 2. | Brief desc | ription of the propert hedule A/B that lists | y and | B that you claim as e Current value of the portion you | xempt, fill in the informati | | Specific laws that allow exemption |
| | property | | | own Copy the value from Schedule A/B | Check only one box for ea | ach exemption. | |
| | 2002, | ury Mountaineer , 2002 Mercury taineer | | \$1,800.00 | 100% of fair market applicable statutory | | 735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b) |
| | Brief | | | 4-4- | | | 735 ILCS 5/12-1001(b) |
| | description Chec | : king account, Bank | | \$536.00 | \$53 | 6.00 | |
| | of Am | erica | | | 100% of fair market applicable statutory | | |
| | Schedule / | <i>VB:</i> <u>17</u> | | | | | |
| 3. | - | aiming a homestead adjustment on 4/01/15 | • | • | 375? cases filed on or after the da | te of adjustment.) | |

No Yes

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

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| Debtor 1 Gregory | | Smith Case number (if kno | own) |
|---|--------------------------------------|---|------------------------------------|
| First Name Middle | e Name L | ast Name | · |
| art 2: Additional Page | | | |
| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption |
| | Copy the value from Schedule A/B | | |
| Brief | | | 735 ILCS 5/12-1001(b) |
| description: | \$400.00 | \$400.00 | |
| TV, Cell Phone | | 100% of fair market value, up to any | |
| Line from Schedule A/B: 07 | | applicable statutory limit | |
| Brief | | | 735 ILCS 5/12-1001(a) |
| description: | \$200.00 | \$200.00 | |
| Misc. Men's Clothing | | 100% of fair market value, up to any | |
| Line from Schedule A/B:11 | | applicable statutory limit | |
| Brief | | | 735 ILCS 5/12-1001(b) |
| description: | \$10.00 | \$10.00 | |
| Misc. | | | |
| Line from Schedule A/B: 12 | | 100% of fair market value, up to any applicable statutory limit | |

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| | | DU | cument Page 22 of | 12 | | |
|------------------------|---|------------------------------|--|---|---|------------------------------------|
| Fill in this info | rmation to identify your ca | ise: | | | | |
| Debtor 1 | Gregory | | Smith | | | |
| Debtor 1 | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States | Bankruptcy Court for the: | Northern | District of Illinois | | | |
| Coop number | | | (State) | | | |
| Case number (If known) | | | | | | |
| Official | Form 106D | | | 1 | | Check if this is an amended filing |
| | | ore Who Hay | va Claima Sagura | d by Dran | | · · |
| Sched | ule D: Crediti | ors who hav | <i>r</i> e Claims Secure | a by Prop | erty | 12/15 |
| 1. Do any No. | ee number (if known). creditors have claims so Check this box and subm . Fill in all of the information t All Secured Claims | nit this form to the court v | y? rith your other schedules. You hav | e nothing else to repo | ort on this form. | |
| List all separate | I secured claims. If a credit ely for each claim. If more the | nan one creditor has a part | ured claim, list the creditor icular claim, list the other creditors order according to the creditor's | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| | Title Loans, Inc. | Describe the property | that secures the claim: | \$2,000.00 | \$1,800.00 | \$200.00 |
| Creditor | 's Name orrence Avenue | 2002 Mercury Mountain | | | | |
| Num | | | the claim is: Check all that apply. | | | |
| | | Contingent | | | | |
| Calum | | Unliquidated | | | | |
| City Who o | State ZIP Code wes the debt? Check one. | Disputed | | | | |
| | btor 1 only | Nature of lien. Check a | ll that apply. | | | |
| De | btor 2 only | An agreement you r | nade (such as mortgage or secured | | | |
| | ebtor 1 and Debtor 2 only | _ ′ | as tax lien, mechanic's lien) | | | |
| | least one of the debtors d another | Judgment lien from | a lawsuit | | | |
| | eck if this claim relates a community debt | Other (including a ri | ght to offset) | | | |
| | ebt was | Last 4 digits of accour | t number | | | |

Add the dollar value of your entries in Column A on this page. Write that number

here:

\$2,000.00

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| | | Document Page 23 of 72 | | | |
|--|--|--|----------------------------------|------------------|--------------------------------|
| Fill in this in | formation to identify your case: | | | | |
| Debtor 1 | Gregory | Smith | | | |
| | First Name Middle Name Last Name Last Name Last Name Last Name Last Name Middle Name Last Name Name | | | | |
| Debtor 2 (Spouse, if filing |) First Name Middle Nar | ne Last Name | | | |
| United State | e Bankruntov Court for the Northern | District of Illinois | | | |
| | · • | | | | |
| (If known) | er | | | | |
| Official | Form 106E/F | | Ch | eck if this is a | n amended filing |
| | | ho Have Unsecured Claim | | | 40/45 |
| | | | | | |
| Form 106A/I claims that a the entries i known). | B) and on Schedule G: Executory Contracts a are listed in Schedule D: Creditors Who Hold n the boxes on the left. Attach the Continuat | nd Unexpired Leases (Official Form 106G). Do not includ Claims Secured by Property. If more space is needed, co on Page to this page. On the top of any additional page | le any credito opy the Part y | rs with partion | ally secured it out, number |
| | | | | | |
| | | inist your | | | |
| ᆸ 별 | | | | | |
| listed, i As mud Continu | dentify what type of claim it is. If a claim has both th as possible, list the claims in alphabetical order uation Page of Part 1. If more than one creditor h | priority and nonpriority amounts, list that claim here and shaccording to the creditor's name. If you have more than two olds a particular claim, list the other creditors in Part 3. | ow both priorit | y and nonprio | rity amounts. |
| | | | | | • |
| | | — Last 4 digits of account number | \$0.00 | \$0.00 | \$0.00 |
| | | | | | |
| | | As of the date you file the claim is: Check all that | | | |
| | | | | | |
| Philac | delphia Pennsylvania 19101 | Contingent | | | |
| City | State Zip Code | Unliquidated | | | |
| | incurred the debt? Check one. Debtor 1 only | Disputed | | | |
| | Debtor 2 only | Type of PRIORITY unsecured claim: | | | |
| | Debtor 1 and Debtor 2 only | Domestic support obligations | | | |
| | at least one of the debtors and another | Taxes and certain other debts you owe the government | | | |
| | Check if this claim relates to a community de | Claims for death or personal injury while you were | 1 | | |
| Is the | e claim subject to offset? | Other. Specify Other | | | |

✓ No Yes

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| Debte | or 1 Gregory First Name Middle Name | Smith Last Name | Case number (if known) | |
|--------|--|---------------------|--|-------------------|
| Part : | | | | |
| 3. [| Oo any creditors have nonpriority unsecured claim No. You have nothing to report in this part. So Yes. | ns against you? | e court with your other schedules. | |
| l I | unsecured claim, list the creditor separately for each c | aim. For each claim | er of the creditor who holds each claim. If a creditor has more listed, identify what type of claim it is. Do not list claims already in Part 3.If you have more than four priority unsecured claims fill ou | cluded in Part 1. |
| | | | | Total claim |
| 4.1 | ARMOR SYSTEMS CO Nonpriority Creditor's Name 1700 KIEFER DR STE 1 | | Last 4 digits of account number 2948 When was the debt incurred? 12/2013 | \$338.00 |
| | Number Street | | | |
| | | | As of the date you file, the claim is: Check all that apply. Contingent | |
| | | 0099 | Unliquidated | |
| | , | p Code | Disputed | |
| | Who incurred the debt? Check one. Debtor 1 only | | | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim relates to a community | debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | 001 Collection; Collecting for ORIGINAL CREDITOR: MEDICAL | |
| | ✓ No | | Other. Specify PAYMENT DATA | |
| | Yes | | | |
| 4.2 | ARMOR SYSTEMS CO | | Last 4 digits of account number 4048 | \$104.00 |
| | Nonpriority Creditor's Name 1700 KIEFER DR STE 1 | | When was the debt incurred? 2/2013 | |
| | Number Street | _ | As of the date you file, the claim is: Check all that apply. | |
| | | | Contingent | |
| | | 0099 | Unliquidated | |
| | City State Z Who incurred the debt? Check one. | p Code | Disputed | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | Student loans | |
| | Debtor 1 and Debtor 2 only | | Obligations arising out of a separation agreement or | |
| | At least one of the debtors and another | | divorce that you did not report as priority claims | |
| | Check if this claim relates to a community | debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | 001 Collection; Collecting for | |
| | ✓ No | | ORIGINAL CREDITOR: MEDICAL Other. Specify PAYMENT DATA | |
| | Yes | | | |
| 4.3 | CERTIFED SVC | | Last 4 digits of account number 2609 | \$204.00 |
| | Nonpriority Creditor's Name 1733 WASHINGTON ST 201 | | When was the debt incurred? 2/2014 | |
| | Number Street | _ | As of the date you file, the claim is: Check all that apply. | |
| | | | Contingent | |
| | · | 0079 | Unliquidated | |
| | City State Z Who incurred the debt? Check one. | p Code | Disputed | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | Student loans | |
| | Debtor 1 and Debtor 2 only | | Obligations arising out of a separation agreement or | |
| | At least one of the debtors and another | | divorce that you did not report as priority claims | |
| | Check if this claim relates to a community | debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | Collection; Collecting for | |
| | ✓ No | | Other. Specify ORIGINAL CREDITOR: MEDICAL | |
| | Yes | | | |

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Debtor 1 Gregory Smith Case number (if known)
First Name Middle Name Last Name

| After listing any entries on this page, number them beginnin | g with 4.5, followed by 4.6, and so forth. | Total claim |
|--|--|-------------|
| CHOICE RECOVERY Nonpriority Creditor's Name POB 614-358-9900 Number Street | Last 4 digits of account number 5083 When was the debt incurred? 1/2015 As of the date you file, the claim is: Check all that apply. | \$241.00 |
| COLUMBUS Ohio 43220 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Yes | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 001 Collection; Collecting for ORIGINAL CREDITOR: MEDICAL Other. Specify PAYMENT DATA | |
| 5 City of Chicago Parking Nonpriority Creditor's Name 121 N. LaSalle St # 107A Number Street | Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent | \$300.00 |
| Chicago Illinois 60602 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt Is the claim subject to offset? ✓ No ☐ Yes | Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify | |
| CREDIT ACCEPTANCE Nonpriority Creditor's Name PO BOX 513 Number Street | When was the debt incurred? 11/2014 As of the date you file, the claim is: Check all that apply. | \$0.00 |
| Southfield Michigan 48037 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? ✓ No | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify 045 Automobile | |

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Debtor 1 Gregory Smith Case number (if known)
First Name Middle Name Last Name

| Part 2 | Your NONPRIORITY Unsecured Claims - Continuation | Page | |
|--------|---|---|-------------|
| | After listing any entries on this page, number them beginning witl | 1 4.5, followed by 4.6, and so forth. | Total claim |
| 4.7 | CREDIT MANAGEMENT LP | Last 4 digits of account number 9942 | \$397.00 |
| | Nonpriority Creditor's Name 4200 INTERNATIONAL PKWY | When was the debt incurred? 1/2012 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. Contingent | |
| | CARROLLTON Texas 75007 | Unliquidated | |
| | City State Zip Code | Disputed | |
| | Who incurred the debt? Check one. Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | 브 | Debts to pension or profit-sharing plans, and other similar | |
| | Check if this claim relates to a community debt Is the claim subject to offset? | debts 001 Collection; Collecting for | |
| | No | ORIGINAL CREDITOR: WOW | |
| | Yes | Other. Specify INTERNET CABLE PHONE - 1 | |
| 40 | | | ¢220.05 |
| 4.8 | Ear Nose & Throat Specialist of IL Nonpriority Creditor's Name | Last 4 digits of account number | \$230.05 |
| | 2773 Solution Center Number Street | When was the debt incurred?n/a | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Chicago Illinois 60677 | Unliquidated | |
| | City State Zip Code | Disputed | |
| | Who incurred the debt? Check one. Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | |
| | At least one of the debtors and another | divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar | |
| | 片 | debts | |
| | Check if this claim relates to a community debt Is the claim subject to offset? | Other. Specify Medical | |
| | No | | |
| | Yes | | |
| 4.0 | | | ΦΕ7.00 |
| 4.9 | FINCNTRL SVC Nonpriority Creditor's Name | Last 4 digits of account number 2442 | \$57.00 |
| | P O BOX 668 N114 W19225 CLINTON Number Street | When was the debt incurred? 3/2013 | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | GERMANTOWN Wisconsin 53022 | Contingent | |
| | GERMANTOWN Wisconsin 53022 City State Zip Code | Unliquidated | |
| | Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | |
| | At least one of the debtors and another | divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar | |
| | Check if this claim relates to a community debt | debts | |
| | Is the claim subject to offset? | Collection; Collecting for Other. Specify ORIGINAL CREDITOR: MEDICAL | |
| | ✓ No | Salor. Opcomy Striction On Edition. WEDIOAL | |
| | Yes | | |

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Smith Debtor 1 Gregory Case number (if known) Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 Howard Brown Health Center \$100.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 415 W Golf Road Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60005 Arlington Heights Illinois City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify ___ Medical Is the claim subject to offset? **✓** No Yes Indiana Farm Bureau Insurance Company \$28,412.18 4.11 Last 4 digits of account number _ Nonpriority Creditor's Name 2150 Intelliplex Drive # 134 When was the debt incurred? n/a Number As of the date you file, the claim is: Check all that apply. C/O Nicholas Dismukes Contingent Unliquidated Shelbyville Indiana 46176 State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Judgement - 2016-M1-010128 Is the claim subject to offset? **✓** No Yes LVNV FUNDING LLC 4.12 \$129.00 Last 4 digits of account number 4539 Nonpriority Creditor's Name When was the debt incurred? 4/2015 P.O. Box 52815 Number Street As of the date you file, the claim is: Check all that apply. c/o Jeremy T. McCullough Aldridge Pite Haan, LLP Contingent Atlanta Georgia 30355 Unliquidated Zip Code City Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify 001 UnknownLoanType Is the claim subject to offset?

✓ No Yes

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Smith Debtor 1 Gregory Case number (if known) Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 \$203.00 0773 Last 4 digits of account number Nonpriority Creditor's Name 1550 N NORTWEST HWY STE 403 When was the debt incurred? 7/2013 Number As of the date you file, the claim is: Check all that apply. Contingent PARK RIDGE Illinois 60068 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? **|** ORIGINAL CREDITOR: MEDICAL **✓** No Other. Specify PAYMENT DATA Yes 4.14 NATIONAL AUTO FINANCE \$657.00 Last 4 digits of account number 6522 Nonpriority Creditor's Name 200 RENAISSANCE CTR When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated DETROIT 48243 Michigan City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ 072 Automobile Is the claim subject to offset? **✓** No Yes **OPPITY FIN** 4.15 \$0.00 9591 Last 4 digits of account number Nonpriority Creditor's Name 11 E. ADAMS SUITE 501 When was the debt incurred? 6/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent 60603 CHICAGO Illinois Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify _ 8 InstallmentLoan Is the claim subject to offset? **✓** No

Yes

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Smith Debtor 1 Gregory Case number (if known) Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** REGIONAL RECOVERY SERV 4.16 \$315.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 5/2014 PO BOX 3333 Number Street As of the date you file, the claim is: Check all that apply. Contingent Munster Indiana 46321 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? **|** ORIGINAL CREDITOR: MEDICAL **✓** No Other. Specify PAYMENT DATA Yes 4.17 Santander Consumer USA \$0.00 Last 4 digits of account number 1000 Nonpriority Creditor's Name PO Box 961245 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Attn: Dinora Gavidia Contingent Fort Worth Texas 76161 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ 076 Automobile Is the claim subject to offset? **✓** No Yes 4.18 Speedy Cash \$500.00 Last 4 digits of account number _ Nonpriority Creditor's Name 1931 N. Mannheim Rd When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Melrose Park Illinois 60160 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt Other. Specify _ Loan Is the claim subject to offset? **✓** No

Yes

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Debtor 1 Gregory Smith __ Case number (if known) Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.19 WEBBNK/FSTR \$0.00 Last 4 digits of account number _ Nonpriority Creditor's Name 6250 RIDGEWOOD ROAD When was the debt incurred? 12/2012 Number Street As of the date you file, the claim is: Check all that apply. Contingent SAINT CLOUD 56303 Minnesota Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify 6 InstallmentLoan Is the claim subject to offset? **✓** No Yes

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Debtor 1 Gregory Smith Case number (if known) Middle Name Last Name Part 3: List Others to Be Notified About a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. HARRIS & HARRIS LTD On which entry in Part 1 or Part 2 did you list the original creditor? Name 111 W JACKSON BLVD S-400 of (Check Line 4.5 Part 1: Creditors with Priority Unsecured Claims one): Number Street Part 2: Creditors with Nonpriority Unsecured CHICAGO 60604 Illinois Last 4 digits of account number City State Zip Code MATEK AND MAZAR LLC On which entry in Part 1 or Part 2 did you list the original creditor? 77 W Washington # 1313 Line 4.11 of (Check Part 1: Creditors with Priority Unsecured Claims one): Number Street Part 2: Creditors with Nonpriority Unsecured Chicago Illinois 60602 Last 4 digits of account number City State Zip Code

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Debtor 1 Gregory Smith Case number (if known)
First Name Middle Name Last Name

| THISTING | ividate value | | |
|-----------------------------|---|-------|-------------------------------|
| Part 4: Add th | ne Amounts for Each Type of Unsecured Claim | | |
| | mounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim. | for s | tatistical reporting purposes |
| | | | Total claims |
| Total claims from Part 1 | 6a. Domestic support obligations. | 6a. | \$0.00 |
| | 6b. Taxes and certain other debts you owe the government | 6b. | \$0.00 |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 |
| | 6d. Other. Add all other priority unsecured claims. Write that | 6d. | \$0.00 |
| | amount here. | 6e. | \$0.00 |
| | 6e. Total. Add lines 6a through 6d. | oe. | |
| | | | Total claims |
| Total claims from Part 2 | 6f. Student loans | 6f. | \$0.00 |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00 |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$0.00 |
| | 6i. Other. Add all other nonpriority unsecured claims. Write | 6i. | \$32,187.23 |
| | that amount here. | • | |
| | 6j. Total. Add lines 6f through 6i. | 6j. | \$32,187.23 |

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| Fill in this information to identify your case: | | | | | | | |
|---|---------------------------|-------------|------------------------------|--|--|--|--|
| Debtor 1 | Gregory | Smith | | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois (State) | | | | |
| Case number (If known) | | | (2.3.3.7) | | | | |

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| ı | Person or comp | eany with whom you have | the contract or lease | State what the contract or lease is for |
|-----|---|-------------------------|-----------------------|--|
| 2.1 | Mitchell, Scott Name 1131 E. 45th Street Number Street | | | Residential Lease, Debtor is Lessee, Monthly Lease |
| | Chicago | Illinois | 60653 | |
| | City | State | Zip Code | |
| 2.2 | Storage Mart Name | | | Storage Lease, Debtor is Lessee, Monthly Lease |
| | 6714 S Cottage Grove Ave | | | • |
| | Number | Street | | |
| | Chicago | Illinois | 60637 | |
| | City | State | Zip Code | |

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| | | DC | Cument Paye | le 34 01 72 |
|---------------------------------|--------------------------|--|----------------------------|--|
| Fill in this infor | rmation to identify you | case: | | |
| Debtor 1 | Gregory | | Smith | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States I | Bankruptcy Court for the | e: Northern | District of Illinois | |
| Case number | | | (State) | |
| (If known) | | | | Check if this is ar |
| | | | | amended filing |
| <u>Official</u> | Form 106H | _ | | |
| Schedul | e H: Your Co | debtors | | 12/15 |
| No Yes 2. Within the Idaho, Lo | e last 8 years, have yo | you are filing a joint case, do bu lived in a community pro lexico, Puerto Rico, Texas, W | operty state or territory? | ? (Community property states and territories include Arizona, California, |
| | | mer spouse, or legal equiva | alent live with you at the | time? |
| | No | | | |
| | Yes. In which commu | nity state or territory did you | u live? | Fill in the name and current address of that person. |
| | Name of your spouse | e, former spouse, or legal equ | ivalent | |
| | Number Street | | | |
| | City | State | Zip Co | ode |
| again as | a codebtor only if tha | t person is a guarantor or o | osigner. Make sure you | r if your spouse is filing with you. List the person shown in line 2 u have listed the creditor on Schedule D (Official Form 106D), thedule D, Schedule E/F, or Schedule G to fill out Column 2. |

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Column 1: Your codebtor

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| Fill in this inform | nation to identify | vour case: | | | | | |
|-----------------------------------|---|---|-------------------|-----------------|-----------------|--|--------------------------|
| | | year ease. | Crositle | | | | |
| | egory st Name | Middle Name | Smith Last Na | ame | Cho | alk if this io | |
| Debtor 2 | | | | | | ck if this is: | |
| (Spouse, if filing) Fir | st Name | Middle Name | Last Na | ame | | An amended filing | |
| United States Ban | kruptcy Court for | Northern | District of Illin | | | A supplement showing expenses as of the follo | post-petition chapter 1: |
| the: Case number | | | (St | ate) | | | wing date. |
| (If known) | | | | | <u> </u> | MM / DD / YYYY | |
| Official Fo | rm 106l | | | | | | |
| Schedule | I: Your In | come | | | | | 12/1 |
| information abou | nt your spouse. It space is needed n). Answer every | • | d your spous | e is not filin | g with you, do | not include informa | tion about your |
| 1. Fill in your em | ployment | | Debtor 1 | | | Debtor 2 | |
| information. | | Employment status | Employ | rod. | | Employed | |
| If you have mo attach a separa | re than one job, | p.oyont otatao | ✓ Employ Not Em | | | Employed Not Employed | |
| information abo | | | LI NOT EII | ipioyea | | I Not Employed | |
| employers. | | Occupation | | | | _ | |
| Include part tim self-employed | ie, seasonal, or | Employer's name | Westingho | use Air Brake 1 | echnologies Inc | _ | |
| | y include student | Employer's address | 1001 Airbra | ake Ave | | | |
| or homemaker, | • | | Number Stre | eet | | Number Street | |
| | | | | | | | |
| | | | Wilmerding | Pennsyl | vania15148 | | |
| | | | City | State | Zip Code | City | State Zip Code |
| | | How long employed | , | | · | | |
| | | there? | | | | | _ |
| Part 2: Give D | etails About M | Ionthly Income | | | | | |
| spouse unless your four for | u are separated. | he date you file this form e more than one employer, et to this form. | • | nformation fo | • | r that person on the lin | , |
| - | gross wages, sala | ry, and commissions (before | | 2. | \$5,021.75 | non-filing spouse | _ |
| be. | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | calculate what the monthly v | wage would | | | | |
| be. | d list monthly over | · | wage would | 3. | + \$0.00 | | _ |

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| Debtor 1Gregory | Smith | Case number | | _ | | | |
|---|---------------------------|--------------|-------------------|-------------------------|--|--|--|
| First Name Middle Name | Last Name | known) | For Debtor 2 or | | | | |
| | | For Debtor 1 | non-filing spouse | | | | |
| Copy line 4 here | → 4. | \$5,021.75 | | | | | |
| 5. List all payroll deductions: | | | | | | | |
| 5a. Tax, Medicare, and Social Security deductions | 5a. | \$1,304.92 | | | | | |
| 5b. Mandatory contributions for retirement plans | 5b. | \$0.00 | | | | | |
| 5c. Voluntary contributions for retirement plans | 5c. | \$0.00 | | | | | |
| 5d. Required repayments of retirement fund loans | 5d. | \$0.00 | | | | | |
| 5e. Insurance | 5e. | \$334.75 | | | | | |
| 5f. Domestic support obligations | 5f. | \$0.00 | | | | | |
| 5g. Union dues | 5g. | \$0.00 | | | | | |
| 5h. Other deductions. Specify: | 5h. + | \$10.36 + | | | | | |
| 6. Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5h$. | 5e +5f + 5g 6. | \$1,650.03 | | | | | |
| 7. Calculate total monthly take-home pay. Subtract line 6 fro | m line 4. 7. | \$3,371.72 | | | | | |
| 8. List all other income regularly received: | | | | | | | |
| 8a. Net income from rental property and from operating business, profession, or farm | | | | | | | |
| Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses the total monthly net income. | | \$0.00 | | | | | |
| 8b. Interest and dividends | 8b. | \$0.00 | | | | | |
| 8c. Family support payments that you, a non-filing spous dependent regularly receive | se, or a | | | | | | |
| Include alimony, spousal support, child support, mainten divorce settlement, and property settlement. | ance, 8c. | \$0.00 | | | | | |
| 8d. Unemployment compensation | 8d. | \$0.00 | | | | | |
| 8e. Social Security | 8e. | \$0.00 | | | | | |
| 8f. Other government assistance that you regularly rece Include cash assistance and the value (if known) of any no cash assistance that you receive, such as food stamps (be under the Supplemental Nutrition Assistance Program) or housing subsidies Specify: | on- | \$0.00 | | | | | |
| 8g. Pension or retirement income | 8g. | \$0.00 | | | | | |
| 8h. Other monthly income. Specify: | 8h. + | \$0.00 + | | | | | |
| 9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f | +8g + 8h. 9. | \$0.00 | | | | | |
| 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-fil | 10. Iing spouse | \$3,371.72 + | = | \$3,371.72 | | | |
| 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. | | | | | | | |
| Specify: | | | 11. | + \$0.00 | | | |
| 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies | | | | | | | |
| | | | | Combined monthly income | | | |
| 13. Do you expect an increase or decrease within the year and No. | after you file this form? | | | | | | |
| <u> </u> | | | | | | | |
| Yes. Explain: | | | | | | | |

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| Debtor 1 | Gregory | | Smith | Case number (if |
|----------|-----------------------|--------------|-----------|-----------------|
| | First Name | Middle Name | Last Name | known) |
| Part 2: | Give Details About Mo | nthly Income | | |

Official Form 106I. Additional page.

| | For Debtor 1 | For Debtor 2 or non-filing spouse |
|---------------------------------------|--------------|-----------------------------------|
| 5h.Other payroll deductions. Specify: | | |
| Charitable contributions | \$4.33 | |
| 2. Healthcare | \$6.02 | |

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| | | D00 | cument Page 38 of a | (2 | |
|------------------------------------|---|--|---|--------------------|---|
| Fill in this infor | mation to identify your | case: | | | |
| Debtor 1 | Gregory | | Smith | | |
| Dalatano | First Name | Middle Name | Last Name | Check if this is: | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | An amended filing | g |
| United States E | Bankruptcy Court for the | e: Northern | District of Illinois (State) | | owing post-petition chapter 13 ne following date: |
| Case number (If known) | | | | MM / DD / YYYY | |
| Official | Form 106J | | | | |
| Schedul | e J: Your Ex | penses | | | 12/1 |
| information. If (if known). Ans | - | l, attach another sheet to th | are filing together, both are equalis form. On the top of any additio | | |
| 1. Is this a joi | | <u> </u> | | | |
| No. Go | to line 2 | | | | |
| | oes Debtor 2 live in a | separate household? | | | |
| | ¬ No | | | | |
| L | _ | filo Official Forma 106 L 2 Eva | enses for Separate Household of De | obtor 2 | |
| 2 Do you hav | | <u> </u> | enses for Separate Household of De | :DIOI 2. | |
| - | e dependents? | | | | |
| Do not list D Debtor 2. | | Yes. Fill out this information fo each dependent | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does dependent live with you? |
| | penses include | No | | | |
| than yourself and dependents | d your | Yes | | | |
| Part 2: Estin | mate Your Ongoing | Monthly Expenses | | | |
| | of a date after the ban | | s you are using this form as a sup upplemental Schedule J, check t | | |
| | | -cash government assistanc it on Schedule I: Your Incon | | | Your expenses |
| | or home ownership entry the ground or lot. 4. | expenses for your residence. | Include first mortgage payments an | d | \$600.00 4. |
| If not incl | uded in line 4: | | | | |
| 4a. Real es | state taxes | | | | 4a \$0.00 |

\$0.00

\$0.00

\$0.00

4b.

4c.

4d.

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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Debtor 1 Gregory Smith Case number (if known) Last Name Case number (if known)

| riistivaille | Mildie Name Last Name | | |
|---|--|------------|------------------|
| | | | Your expenses |
| 5. Additional mortgage paymen | ts for your residence, such as home equity loans | 5. | \$0.00 |
| 6. Utilities: | | | |
| 6a. Electricity, heat, natural gas | | 6a. | \$280.00 |
| 6b. Water, sewer, garbage coll | ection | 6b. | \$0.00 |
| 6c. Telephone, cell phone, Int | ernet, satellite, and cable services | 6c. | \$225.00 |
| 6d. Other. Specify: | | 6d | \$0.00 |
| 7. Food and housekeeping supp | olies | 7. | \$350.00 |
| 8. Childcare and children's edu | cation costs | 8. | \$0.00 |
| 9. Clothing, laundry, and dry cl | eaning | 9. | \$105.00 |
| 10. Personal care products and | Services | 10. | \$100.00 |
| 11. Medical and dental expens | es | 11. | \$91.00 |
| 12. Transportation. Include gas, Do not include car payments | maintenance, bus or train fare. | 12. | \$350.00 |
| 13. Entertainment, clubs, recre | ation, newspapers, magazines, and books | 13. | \$0.00 |
| 14. Charitable contributions ar | d religious donations | 14. | \$185.00 |
| 15. Insurance. Do not include insurance dedu | acted from your pay or included in lines 4 or 20. | | |
| 15a. Life insurance | | 15a | \$0.00 |
| 15b. Health insurance | | 15b | \$0.00 |
| 15c. Vehicle insurance | | 15c | \$235.00 |
| 15d. Other insurance. Specify: | | 15d | \$0.00 |
| 16. Taxes. Do not include taxes of | leducted from your pay or included in lines 4 or 20. | | |
| Specify: | | 16 | \$0.00 |
| 17. Installment or lease payme | nts: | 10 | |
| 17a. Car payments for Vehicle | | 17a | \$0.00 |
| 17b. Car payments for Vehicle | 2 | 17b | \$0.00 |
| 17c. Other. Specify: Storage | Mart - Lease | 17c | \$250.00 |
| 17d. Other. Specify: | | 17d | \$0.00 |
| | maintenance, and support that you did not report as deducted from | | \$0.00 |
| | e I, Your Income (Official Form 106I). | 18. | |
| , , , | o support others who do not live with you. | | |
| Specify: | | 19. | \$0.00 |
| 20. Other real property expense 20a. Mortgages on other prop | s not included in lines 4 or 5 of this form or on Schedule I: Your Income. | 202 | \$0.00 |
| 20b. Real estate taxes. | v | 20a 20b | \$0.00 \$0.00 |
| 20c. Property, homeowner's, | or renter's insurance | | |
| 20d. Maintenance, repair, and | | 20c | \$0.00 |
| 20e. Homeowner's association | | 20d | \$0.00 |
| 206. Homeowner 5 association | i or condeminant dues | 20e | \$0.00 |

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| Debtor 1 Grego | | | Smith | Case number (if known) | | | |
|----------------|----------------------------|---------------------------|---|------------------------|--------|---|------------|
| First N | ame | Middle Name | Last Name | | | | |
| 21.Other. Spec | cify: | | | | 21 | - | \$0.00 |
| | | | | | _ | | |
| | your monthly expenses | s. | | | | | \$2,771.00 |
| | es 4 through 21. | | | | \$0.00 | | |
| | ` . | | from Official Form 106J-2 | | | | \$2,771.00 |
| 22c. Add lin | e 22a and 22b. The resu | ult is your monthly expe | enses. | | 22. | | |
| 23.Calculate y | our monthly net incom | ne. | | | | | |
| 23a. Copy I | ine 12 (your combined n | nonthly income) from S | schedule I. | | 23a | | \$3,371.72 |
| 23b. Copy | our monthly expenses f | from line 22 above. | | | 23b | | \$2,771.00 |
| | ct your monthly expense | | come. | | | | \$600.72 |
| The re | sult is your monthly net | income. | | | 23c | | |
| For examp | le, do you expect to finis | sh paying for your car lo | es within the year after can within the year or do y codification to the terms of | ou expect your | | | |

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| Fill in this information to identify your case: | | | | | | | |
|---|---------------------------|-------------|------------------------------|--|--|--|--|
| Debtor 1 | Gregory | | Smith | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois (State) | | | | |
| Case number (If known) | | | | | | | |

Official Form 106Dec

| П | Check if this is an |
|---|---------------------|
| _ | amended filing |

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t 1: Sign Below | |
|-----|--|---|
| | Did you pay or agree to pay someone who is NOT an attorney to I | nelp you fill out bankruptcy forms? |
| | ✓ No | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | | |
| | | |
| | Under penalty of perjury, I declare that I have read the summary | and schedules filed with this declaration and |
| | that they are true and correct. | |
| × | /s/ Gregory Smith | x |
| | Signature of Debtor 1 | Signature of Debtor 2 |
| | Date 1/5/2018 | Date |
| | MM/DD/YYYY | MM/DD/YYYY |

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| Fill in this info | rmation to identify your o | case: | | - | | | |
|---------------------------------|--|----------------------------|----------------------------|-------------------|---------|----------|-----------------------------------|
| Debtor 1 | Gregory | | Smith | | | | |
| 20010. 1 | First Name | Middle Na | | e | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Na | ame Last Nam | <u> </u> | | | |
| United States I | Bankruptcy Court for the: | Northern | District of Illino | is | | | |
| Case number | | | (State | e) | | | |
| (If known) | | | | | | | |
| Official | Form 107 | | | | | | Check if this is a amended filing |
| | ent of Financia | al Affaire fo | r Individuals | Filing for | Rankru | ntcv | 04/1 |
| information. number (if kn | ete and accurate as po If more space is neede lown). Answer every q | ed, attach a separuestion. | rate sheet to this form | On the top of a | | | |
| Part 1: Give | e Details About Your | Marital Status a | ind Where You Lived | Before | | | |
| 1. What is | your current marital st | atus? | | | | | |
| | arried | | | | | | |
| ✓ No | t married | | | | | | |
| 2. During | the last 3 years, have yo | ou lived anywhere | other than where you liv | re now? | | | |
| V No | s. List all of the places yo | ou lived in the last (| 3 years. Do not include v | where you live no | w. | | |
| De | btor 1: | | Dates Debtor 1 lived there | Debtor 2: | | | Dates Debtor 2 lived there |
| | | | | Same as D | ebtor 1 | | Same as Debtor 1 |
| Nu | mber Street | | From | Number Street | | | From |
| | | | To | | | | То |
| | | | | - | | | |
| City | y State | Zip Code | | City Same as D | State | Zip Code | Same as Debtor 1 |
| | | | | Same as L | ebioi i | | Same as Debior 1 |
| Nu | mber Street | | From | Number Street | | | From |
| | | | То | | | | То |
| | u Ctata | Zin Codo | | City | Stata | Zin Codo | |
| City | y State | Zip Code | | City | State | Zip Code | |
| and territo | e last 8 years, did you e ories include Arizona, Califo Make sure you fill out S | ornia, Idaho, Louisia | ana, Nevada, New Mexico, | Puerto Rico, Texa | | | |

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Smith

| Deb | tor 1 | Gregory | Smith | | umber (if known) | | | | | |
|------|-------------------------|--|--|--|--|--|--|--|--|--|
| | | First Name Middle | e Name Last Nan | ne | | | | | | |
| Part | 2: | Explain the Sources of Your Inc | come | | | | | | | |
| 4. | Filli | you have any income from employm in the total amount of income you receivoities. If you are filing a joint case and you No Yes. Fill in the details. | ved from all jobs and all busin | nesses, including part-time | | ars? | | | | |
| | | | Debtor 1 | | Debtor 2 | | | | | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | | | | |
| | | rom January 1 of current year until ne date you filed for bankruptcy: | Wages, commissions, bonuses, tips Operating a business | \$58316.13 | Wages, commissions, bonuses, tips Operating a business | | | | | |
| | | or last calendar year: anuary 1 to December 31, 2017) YYYY | Wages, commissions, bonuses, tips Operating a business | \$51974.00 | Wages, commissions, bonuses, tips Operating a business | | | | | |
| | | or the calendar year before that: anuary 1 to December 31, 2016) YYYY | Wages, commissions, bonuses, tips Operating a business | \$53462.00 | Wages, commissions, bonuses, tips Operating a business | | | | | |
| | Inclu publ filing | Did you receive any other income during this year or the two previous calendar years? nclude income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are illing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. | | | | | | | | |
| | ✓ | No Yes. Fill in the details. | | | | | | | | |
| | | | Debtor 1 | | Debtor 2 | | | | | |
| | | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | | | | |
| | | from January 1 of current year until he date you filed for bankruptcy: | | | | | | | | |
| | | for last calendar year: January 1 to December 31, 2017) YYYY | | | | | | | | |
| | | For the calendar year before that: January 1 to December 31, 2016) YYYYY | | | | | | | | |
| | | | | | | | | | | |

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Smith Debtor 1 Gregory __ Case number (if known) Middle Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors

Other

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| tor 1 | Gregory | | | Sr | nith | Case number | (if known) |
|--------------------|---|--|--|--|--|--|--|
| | First Name | | Middle Name | Las | st Name | | |
| Insi com age | ders include your porations of which | relatives; a gou are a for a busir | any general partners an officer, director, ness you operate as | s; relatives of any person in control | general partners; part or owner of 20% or | tnerships of which y more of their voting | who was an insider? you are a general partner; g securities; and any managing r domestic support obligations, |
| ✓ | No | | | | | | |
| | Yes. List all pay | ments to a | an insider. | Dates of | Total amount | Amount you | Reason for this payment |
| | | | | payment | paid | still owe | nousen for the payment |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City | State | Zip Code | | | | |
| - | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | - Circuit | | | | | | |
| | City | State | Zip Code | | | | |
| insi | der? ude payments on No | debts gua | aranteed or cosigne | ed by an insider. | Total amount paid | Amount you still owe | Reason for this payment Include creditor's name |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City | State | Zip Code | | | | |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | | | | | | | |
| | City | State | Zip Code | | | | |

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Smith Debtor 1 Gregory Case number (if known) Middle Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title PERSONAL INJURY(MOTOR Circuit Court of Cook County, Illinois Pending INDIANA FARM BUREA v. SMITH VEHICLE) SUBROGATION Court Name **GREGORY** On appeal 5600 Old Orchard Road **NumberStreet** Concluded Case number Illinois Skokie 60077 2016-M1-010128 City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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| Debt | tor 1 Gregory | Smith | Case number (if known) | |
|------|---|-----------------------------|--|-----------------------|
| | First Name Middle Name | Last Name | | |
| 11. | Within 90 days before you filed for bankruptcy, did accounts or refuse to make a payment because you | | pank or financial institution, set off any amo | ounts from your |
| | Yes. Fill in the details. | | | |
| | | Describe the action th | e creditor took Date action was taken | Amount |
| | Creditor's Name | | | - |
| | Number Street | | | |
| | | Last 4 digits of account | number: XXXX- | |
| | City State Zip Code | | | |
| 12. | Within 1 year before you filed for bankruptcy, was a appointed receiver, a custodian, or another official | | possession of an assignee for the benefit o | f creditors, a court- |
| | No | | | |
| | Yes | | | |
| Part | 5: List Certain Gifts and Contributions | | | |
| 13. | Within 2 years before you filed for bankruptcy, did | you give any gifts with a t | otal value of more than \$600 per person? | |
| | No Yes. Fill in the details for each gift. | | | |
| | Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts | Value |
| | | | | |
| | Person to Whom You Gave the Gift | | | - |
| | Number Street | | | |
| | City State Zip Code | | | |
| | Person's relationship to you | | | |
| | Person to Whom You Gave the Gift | | | _ |
| | | | | |
| | Number Street | | | |
| | City State Zip Code | | | |
| | Person's relationship to you | | | |

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| | Gregory | Smith Case number | (if known) | |
|----------|---|---|---|---------------------|
| | First Name Middle Name | Last Name | | |
| | | | | |
| . Wit | thin 2 years before you filed for bankruptcy, o | did you give any gifts or contributions with a total v | alue of more than \$600 | to any charity? |
| | l No | | | |
| ✓ | No | | | |
| | Yes. Fill in the details for each gift or contrib | ution. | | |
| | Gifts or contributions to charities | Describe what you contributed | Date you | Value |
| | that total more than \$600 | Describe what you contributed | contributed | value |
| | that total more than \$000 | | Contributed | |
| | | | | |
| | Charity's Name | | | |
| | | | | |
| | | | | |
| | Number Street | _ | | |
| | Number Succe | | | |
| | City State Zip Code | _ | | |
| | Oity State Zip Gode | | | |
| C. | List Certain Losses | | | |
| | | | | |
| \A/:+ | hin 4 was hafara way filad for hankwinter ar | since you filed for bankruptcy, did you lose anythin | a bassing of theft fire | athau diacatau au |
| | mbling? | since you med for bankruptcy, did you lose anythin | g because of their, ine, | other disaster, or |
| 901 | | | | |
| ✓ | No | | | |
| П | Yes. Fill in the details. | | | |
| | | | | |
| | Describe the property you lost and | Describe any insurance coverage for the los | | Value of property |
| | how the loss occurred | Include the amount that insurance has paid. Lis | | lost |
| | | pending insurance claims on line 33 of <i>Schedul</i> | <i>le</i> | |
| | | A/B: Property. | | |
| | | | | |
| | List Certain Payments or Transfers | | | |
| | | d you or anyone else acting on your behalf pay or to | ransfer any property to | anyone you consulte |
| | out seeking bankruptcy or preparing a bankr | | | |
| 1110 | luda any attornave hankruntov natition praparare | | our bankruntov | |
| | lude any attorneys, bankruptcy petition preparers | s, or credit counseling agencies for services required in y | our bankruptcy. | |
| | lude any attorneys, bankruptcy petition preparers No | | our bankruptcy. | |
| | No | | our bankruptcy. | |
| ✓ | | s, or credit counseling agencies for services required in y | | |
| □ | No | e, or credit counseling agencies for services required in y Description and value of any property | Date payment | |
| ✓ | No | s, or credit counseling agencies for services required in y | Date payment or transfer | Amount of payment |
| ✓ | No Yes. Fill in the details. | e, or credit counseling agencies for services required in y Description and value of any property | Date payment or transfer was made | payment |
| □ | No Yes. Fill in the details. Semrad Law Firm | e, or credit counseling agencies for services required in y Description and value of any property | Date payment or transfer | |
| ✓ | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid | p., or credit counseling agencies for services required in y Description and value of any property transferred | Date payment or transfer was made | payment |
| □ | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue | p., or credit counseling agencies for services required in y Description and value of any property transferred | Date payment or transfer was made | payment |
| □ | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid | p., or credit counseling agencies for services required in y Description and value of any property transferred | Date payment or transfer was made | payment |
| □ | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue | p., or credit counseling agencies for services required in y Description and value of any property transferred | Date payment or transfer was made | payment |
| □ | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street | p., or credit counseling agencies for services required in y Description and value of any property transferred | Date payment or transfer was made | payment |
| □ | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 | p., or credit counseling agencies for services required in y Description and value of any property transferred | Date payment or transfer was made | payment |
| □ | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street | p., or credit counseling agencies for services required in y Description and value of any property transferred | Date payment or transfer was made | payment |
| | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code | p., or credit counseling agencies for services required in y Description and value of any property transferred | Date payment or transfer was made | payment |
| | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 | p., or credit counseling agencies for services required in y Description and value of any property transferred | Date payment or transfer was made | payment |
| | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address | p., or credit counseling agencies for services required in y Description and value of any property transferred | Date payment or transfer was made | payment |
| | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code | p., or credit counseling agencies for services required in y Description and value of any property transferred | Date payment or transfer was made | payment |
| | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address | p., or credit counseling agencies for services required in y Description and value of any property transferred | Date payment or transfer was made | payment |
| | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address | p., or credit counseling agencies for services required in y Description and value of any property transferred | Date payment or transfer was made | payment |
| | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid | p., or credit counseling agencies for services required in y Description and value of any property transferred | Date payment or transfer was made | payment |
| | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address Person Who Made the Payment, if Not You | p., or credit counseling agencies for services required in y Description and value of any property transferred | Date payment or transfer was made | payment |
| | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid | p., or credit counseling agencies for services required in y Description and value of any property transferred | Date payment or transfer was made | payment |
| | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid | p., or credit counseling agencies for services required in y Description and value of any property transferred | Date payment or transfer was made | payment |
| | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid Number Street | p., or credit counseling agencies for services required in y Description and value of any property transferred | Date payment or transfer was made | payment |
| | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid | p., or credit counseling agencies for services required in y Description and value of any property transferred | Date payment or transfer was made | payment |
| | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid Number Street City State Zip Code | p., or credit counseling agencies for services required in y Description and value of any property transferred | Date payment or transfer was made | payment |
| | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid Number Street | p., or credit counseling agencies for services required in y Description and value of any property transferred | Date payment or transfer was made | payment |
| | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid Number Street City State Zip Code | p., or credit counseling agencies for services required in y Description and value of any property transferred | Date payment or transfer was made | payment |

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| Debtor 1 | Gregory | | Smith | Case number (if know | vn) | |
|----------|--|------------------------|--|----------------------------|---|-----------------------------|
| | First Name | Middle Name | Last Name | | | |
| he | Ip you deal with your cree not include any payment o | ditors or to make payn | | our behalf pay or transfe | er any property to a | anyone who promised to |
| | Yes. Fill in the details. | | | | | |
| | | | Description and value of a transferred | ny property | Date payment or transfer was made | Amount of payment |
| | Person Who Was Paid | | - | | | |
| | Number Street | | - | | | |
| | City State | Zip Code | - - | | | |
| | City State | Zip Code | | | | |
| | No Yes. Fill in the details. | | Description and value of p transferred | | ny property or received or debts p le | Date paid transfer was made |
| | Person Who Received Tr | ansfer | - | iii oxonang | | |
| | Number Street | | - | | | |
| | City State Person's relationship to y | • | - | | | |
| | Person Who Received Tr | ansfer | - | | | |
| | Number Street | | - - | | | |
| | City State Person's relationship to y | | - | | | |
| be | thin 10 years before you to neficiary? | | d you transfer any property to | a self-settled trust or si | milar device of wh | ich you are a |
| <u>~</u> | No Yes. Fill in the details. | | | | | |
| L | 1 . S.S. F III TO GOLDING. | | Description and value of | the property transferre | d | Date transfer was made |
| | Name of trust | | | | | |

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Smith Debtor 1 Gregory Case number (if known) Middle Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was number instrument before closed, sold, closing or moved, or transfer transferred Checking XXXX-Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? Storage Mart Deceased Wife's items No Name of Storage Facility Name 6714 S Cottage Grove Ave Number Street Number Street City State Zip Code Chicago Illinois 60637

City

State

Zip Code

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Smith Debtor 1 Gregory Case number (if known) Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code City State Zip Code Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

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| Debt | | Gregory | | | Sm | ith | Cas | e number (ii | fknown) | | |
|------|----------|----------------------------|------------------|-------------------|--------------|---|--------------------|--------------|---------------|------------------------------------|--------------------------------|
| | | First Name | | Middle Name | Last | Name | | | | | |
| 26. | Hav | e you been a part | y in any judic | ial or administr | ative procee | ding under | any environmer | ntal law? In | clude settler | ments and orde | ers. |
| | | No Yes. Fill in the def | tails. | | | | | | | | |
| | | | | | Court or age | ncy | | Nature | of the case | | Status of the case |
| | | Case title | | | | | | | | | Pending |
| | | | | | Court Name | | | | | | On appeal |
| | | Case number | | | NumberStree | t | | | | | Concluded |
| | | | | | City | State | Zip Code | | | | Considuou |
| Part | 11: | Give Details Al | oout Your B | Business or Co | nnections | to Any Bu | siness | | | | |
| 27. | Witl | nin 4 years before | you filed for | bankruptcy, did | you own a b | ousiness or | have any of the | following c | onnections t | o any business | s? |
| | | - | | | | | activity, either f | _ | | · | |
| | | A member of | f a limited liab | ility company (L | - | | - | · | | | |
| | | Ap officer di | - | naging executiv | e of a corpo | ration | | | | | |
| | | _ | | f the voting or e | - | | ooration | | | | |
| | V | No. None of the a | above applies | s. Go to Part 12. | | | | | | | |
| | | Yes. Check all the | at apply abov | e and fill in the | | | | | | | |
| | | | | | Descri | be the natu | ire of the busine | ess | | | umber Do not umber or ITIN. |
| | | Business Name | | | _ | | | | EIN: | | |
| | | Number Street | | | _ | | | | Dates busi | ness existed | |
| | | City | State | Zip Code | Name — | of accounta | ant or bookkeep | er | From | To | |
| | | , | | _р 2000 | | | | | 110111 | 10 | |
| | | | | | | | | | | | |
| | | | | | Descri | be the natu | ire of the busine | ess | | dentification n cial Security n | umber Do not umber or ITIN. |
| | | Business Name | | | _ | | | | EIN: | | |
| | | Number Street | | | _ | | | | Dates husi | ness existed | |
| | | | | | Name | of account | ant or bookkeep | er | Dates Dasi | ness existed | |
| | | City | State | Zip Code | | | | | From | To | |
| | | | | | | | | | | | |
| | | | | | Descri | be the natu | ire of the busine | ess | | | umber Do not |
| | | | | | | | | | include So | cial Security n | umber or ITIN. |
| | | Business Name | | | | | | | 1. | | |
| | | Number Street | | | Name | of account: | ant or bookkeep | er | Dates busi | ness existed | |
| | | City | State | Zip Code | _ | , | | | From | То | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |

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| Deb | tor 1 Gregory | | Smith | Case number (if known) |
|------|--|----------------------------------|------------------------------------|--|
| | First Name | Middle Name | Last Name | |
| 28. | Within 2 years b creditors, or oth | | id you give a financial stateme | ent to anyone about your business? Include all financial institutions, |
| | ✓ No Yes. Fill in th | ne details below. | | |
| | | | Date issued | |
| | Name | | MM/DD/YYYY | |
| | | | | |
| | Number S | treet | | |
| | City | State Zip Code | | |
| Part | 12: Sign Belov | | | |
| t | true and correct. a bankruptcy case | I understand that making a false | e statement, concealing prope | ents, and I declare under penalty of perjury that the answers are rty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | × | /s/ Gregory Smith | | × |
| | 5 | Signature of Debtor 1 | | Signature of Debtor 2 |
| | [| Date 1/5/2018 | | Date |
| | Did you attach ad | ditional pages to Your Statemer | nt of Financial Affairs for Indivi | duals Filing for Bankruptcy (Official Form 107)? |
| r | √ No | . • | | , |
| į | Yes | | | |
| | Did you pay or agı | ree to pay someone who is not a | n attorney to help you fill out | bankruptcy forms? |
| ſ | √ No | | | |
| Ī | Yes. Name of | person | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

| | | Northern Dis | trict of Illinois | | | | | |
|-----|--|---|--|---|--|--|--|--|
| re_ | Gregory Smith | | Case No. | | | | | |
| | Debtor | | 01 | (If known) | | | | |
| | | | Chapter | Chapter 13 | | | | |
| | DISCLOSURE OF | COMPENSATI | ON OF ATTORNEY | FOR DEBTOR | | | | |
| 1 | . Pursuant to 11 U.S.C. § 329(a) and F compensation paid to me within one rendered or to be rendered on behalf | year before the filing of t | he petition in bankruptcy, or agre | ed to be paid to me, for services | | | | |
| | For legal services, I have agreed to ac | cept | | \$4,000.00 | | | | |
| | Prior to the filing of this statement I h | ave received | | \$0.00 | | | | |
| | Balance Due | | | \$4,000.00 | | | | |
| 2 | . The source of the compensation paid | to me was: | | | | | | |
| | ✓ Debtor | Other (spec | ify) | | | | | |
| 3 | . The source of the compensation paid | to me is: | | | | | | |
| | ✓ Debtor | Other (spec | ify) | | | | | |
| 4 | I have not agreed to share the ab members and associates of my la | | ation with any other person unless | s they are | | | | |
| | | firm. A copy of the agre | with a other person or persons werent, together with a list of the r | | | | | |
| 5 | . In return for the above-disclosed fee, a. Analysis of the debtor's finan bankruptcy; | - | · · | bankruptcy case, including: nining whether to file a petition in | | | | |
| | b. Preparation and filing of any p | b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required; | | | | | | |
| | c. Representation of the debtor | at the meeting of credito | rs and confirmation hearing, and | any adjourned hearings thereof; | | | | |
| | d. Representation of the debtor | in adversary proceedings | and other contested bankruptcy | matters; | | | | |
| 6 | . By agreement with the debtor(s), the | above-disclosed fee does | s not include the following service | es: | | | | |
| | | | | | | | | |
| | | CERTII | FICATION | | | | | |
| | certify that the foregoing is a complet tor(s) in this bankruptcy proceedings. | e statement of any agree | ment or arrangement for payment | to me for representation of the | | | | |
| | 1/5/2018 | | /s/ Megan Holmes | | | | | |
| | Date | | Signature of Attorney | | | | | |
| | | | Semrad Law Firm | | | | | |
| | | | Name of law firm | | | | | |

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

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6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

 Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney.* If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor.* If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$362.00
- 3. Before signing this agreement, the attorney has received, \$0.00 toward the flat fee, leaving a balance due of \$4,000.00; and \$52.00 for expenses, leaving a balance due of \$4,362.00
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: 1/5/2018 | |
|------------------------------|------------------------|
| Signed: | |
| /s/ Gregory Smith / July SWW | |
| | /s/ Megan Holmes |
| Debtor(s) | Attorney for Debtor(s) |

Do not sign if the fee amounts at top of this page are blank.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$275 | total fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$200 | filing fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to:
http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit
20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Smith, Gregory Debtor(s) | Case No | Case No | | | |
|-----------------|---------------------------|---|-------------------------------------|--|--|--|
| | | Chapter. | Chapter13 | | | |
| | VERIFIC | CATION OF CREDITOR MAT | RIX | | | |
| Th knowledge | | that the attached list of creditors is true | ue and correct to the best of their | | | |
| Date: | 1/5/2018 | /s/ Smith, Gregor Smith, Gregory Signature of Deb | | | | |

NATIONAL AUTO FINANCE Po Box 96038 Charlotte, NC, 28296

CREDIT MANAGEMENT LP PO Box 118288 Carrollton, TX, 75011

ARMOR SYSTEMS CO 1700 KIEFER DR STE 1 ZION, IL, 60099

REGIONAL RECOVERY SERV PO BOX 3333 Munster, IN, 46321

CHOICE RECOVERY 1550 Old Henderson Road, Suite S100 Columbus, OH, 43220

CERTIFED SVC 1733 WASHINGTON ST 201 WAUKEGAN, IL, 60079

MBB 1550 N NORTWEST HWY STE 403 PARK RIDGE, IL, 60068

LVNV FUNDING LLC PO Box 10587 Greenville, SC, 29603

FINCNTRL SVC P O BOX 668 N114 W19225 CLINTON GERMANTOWN, WI, 53022

OPPITY FIN 11 E. ADAMS SUITE 501 CHICAGO, IL, 60603

CREDIT ACCEPTANCE 25505 West 12 Mile Road Ste. 3000 Southfield, MI, 48034 Santander Consumer USA ATT POC: Janiscia Jackson PO Box 961245 Fort Worth, TX, 76161

WEBBNK/FSTR 6250 RIDGEWOOD ROAD SAINT CLOUD, MN, 56303

Illinois Title Loans, Inc. 1511 West Jefferson Joliet, IL, 60435

IRS Po Box 7346 Philadelphia, PA, 19101

Speedy Cash Po Box 101928 Birmingham, AL, 35210

City of Chicago Parking 121 N. LaSalle St # 107A Chicago, IL, 60602

HARRIS & HARRIS LTD 222 Merchandise Mart Plaza, Suite 1900 Chicago, IL, 60654

Indiana Farm Bureau Insurance Company 2150 Intelliplex Drive # 134 C/O Nicholas Dismukes Shelbyville, IN, 46176

MATEK AND MAZAR LLC 77 W Washington # 1313 Chicago, IL, 60602

Howard Brown Health Center 4025 N Sheridan Rd Chicago, IL, 60613

Ear Nose & Throat Specialist of IL 2773 Solution Center Chicago, IL, 60677 Case 18-00306 Doc 1 Filed 01/05/18 Entered 01/05/18 12:25:28 Desc Main Document Page 67 of 72

| Debtor 1 Gregory First Name | | | e number <i>(if known)</i> | |
|---|--|--|---|--|
| | Middle Name Lase Hestions for Reporting Purposes | st Name | | |
| 16. What kind of debts do you have? | 16a. Are your debts primarily of "incurred by an individual p No. Go to line 16b. ☑ Yes. Go to line 17. 16b. Are your debts primarily b money for a business or inv ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you | orimarily for a personal, far pusiness debts? Business vestment or through the o | mily, or household or <i>debts</i> are debts th peration of the bus | purpose." at you incurred to obtain siness or investment. |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | ☐ No. | | iny exempt property ute to unsecured cre | is excluded and administrative editors? |
| ^{18.} How many creditors do you estimate that you owe? | ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | 1,000-5,000 5,001-10,000 10,001-25,000 | | 25,001-50,000 50,001-100,000 More than 100,000 |
| 19. How much do you estimate your assets to be worth? | | \$1,000,001-\$10 r \$10,000,001-\$50 \$50,000,001-\$10 \$100,000,001-\$5 | million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| ^{20.} How much do you estimate your liabilities to be? | | \$1,000,001-\$10 r \$10,000,001-\$50 \$50,000,001-\$10 \$100,000,001-\$5 | million 0 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| Part 7: Sign Below | | | | |
| | I have examined this petition, and correct. If I have chosen to file under Chap of title 11, United States Code. I under Chapter 7. If no attorney represents me and I out this document, I have obtained I request relief in accordance with I understand making a false staten connection with a bankruptcy case both. 18 U.S.C. §§ 152, 1341, 157 | oter 7, I am aware that I ma inderstand the relief availa did not pay or agree to pa d and read the notice requ the chapter of title 11, Un nent, concealing property, e can result in fines up to | by proceed, if eligible under each charms someone who is ired by 11 U.S.C. § ited States Code, so or obtaining mone | le, under Chapter 7, 11,12, or 13 apter, and I choose to proceed not an attorney to help me fill § 342(b). specified in this petition. By or property by fraud in sonment for up to 20 years, or |
| | Executed on 1/5/2018 MM / DD / Y | | Executed on | MM / DD / YYYY |

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| Fill in this infor | mation to identify your c | ase: | | | |
|--|---------------------------|---------------------------|---|--|---|
| Debtor 1 | Gregory | | Smith | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse, if filing) | F: | | | | |
| | First Name | Middle Name | Last Name | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois | | |
| Case number | | | (State) | | |
| (If known) | | | | | |
| Official | Form 106De | eC | | | Check if this is a amended filing |
| Declarat | ion About an | – Individual Deb | otor's Schedules | | 12/1 |
| If two married | people are filing togethe | er, both are equally resp | onsible for supplying correct infor | mation. | |
| money or prope U.S.C. §§ 152, Part 1: Sign | 1341, 1519, and 3571. | on with a bankruptcy ca | ise can result in fines up to \$250, | 200, or imprisonment for up to 20 ye | ∍ars, or both. 18 |
| Did you pa | ay or agree to pay some | one who is NOT an attor | ney to help you fill out bankrupto | y forms? | TOOL IN THE TOTAL STATE OF THE PARTY OF THE |
| √ No | | | | | |
| Yes. N | lame of person | | Attach Bankruptcy Petition Signature (Official Form 11 | Preparer's Notice, Declaration, and 9). | |
| ļ. | | | | | |



MM/DD/YYYY

Date 1/5/2018

MM/DD/YYYY

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| Debtor ² | 1 Gregory | | Smith | Case number (if known) |
|---------------------|--|---------------------------------------|--------------------------------|--|
| ~~~ | First Name | Middle Name | Last Name | |
| 28. Wi | thin 2 years before yeditors, or other par | ou filed for bankruptcy, did ties. | you give a financial staten | nent to anyone about your business? Include all financial institutions, |
| | No Yes. Fill in the deta | ils below. | | |
| - | | | Date issued | |
| | · · | PARIO | | |
| | Name | | MM/DD/YYYY | |
| | Number Street | | | |
| | City | State Zip Code | **** | |
| | — Oity | State Zip Code | | |
| Part 12: | Sign Below | | | |
| true | and correct. I under | stand that making a false st | tatement, concealing prop | nents, and I declare under penalty of perjury that the answers are erty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | 3 | | | Date |
| | Date 1 | /5/2018 | | Date |
| Did y | ou attach additiona | I pages to Your Statement o | of Financial Affairs for Indiv | iduals Filing for Bankruptcy (Official Form 107)? |
| | No | | | |
| | /es | | | |
| Did y | ou pay or agree to p | ay someone who is not an a | ttorney to help you fill out | bankruptcy forms? |
| V I | No | | | |
| | es. Name of person | | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

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| Debt | or 1 Gregory First Name | Middle Name | Smith Last Name | Case number (if known) | |
|--------|---|--|--|--|-------------|
| 16. | Calculate the median fa | mily income that applies to y | | | |
| | 16a. Fill in the state in whi | | Illinois | | |
| | 16b. Fill in the number of | • | 1 | | |
| | 16c. Fill in the median fam | ily income for your state and siz | ze of | | \$51,317.00 |
| | household | | To find | l a list of applicable median income amounts, go online ay also be available at the bankruptcy clerk's office. | |
| 17. | How do the lines compar | | , | ay also be available at the ballitapity block of office. | - |
| | 17a. Line 15b is less tunder 11 U.S.C. | han or equal to line 16c. On the <i>§ 1325(b)(3)</i> . Go to Part 3. Do | e top of page 1 of this NOT fill out <i>Calculatio</i> | form, check box 1, <i>Disposable income is not determined</i> on of <i>Disposable Income</i> (Official Form 122C-2). | |
| | U.S.C. § 1325(b, | than line 16c. On the top of pa l(3). Go to Part 3 and fill out C current monthly income from lin | Calculation of Dispos | ck box 2, <i>Disposable income is determined under 11</i> able Income (Official Form 122C-2). On line 39 of that | |
| Part | 3: Calculate Your Co | mmitment Period Under 1 | 11 U.S.C. §1325(b) | (4) | |
| 18. | T | monthly income from line 11. | *************************** | | \$5,360.82 |
| 19. | Deduct the marital adjust commitment period under | tment if it applies. If you are r 11 U.S.C. § 1325(b)(4) allows y | named, your spouse is ou to deduct part of y | s not filing with you, and you contend that calculating the our spouse's income, copy the amount from line 13. | |
| | 19a. If the marital adjustme | ent does not apply, fill in 0 on lir | ne 19a. | and the second of the second o | -\$0.00 |
| | 19b. Subtract line 19a fro | om line 18. | | | \$5,360.82 |
| 20. | Calculate your current m | onthly income for the year. F | ollow these steps: | | |
| | 20a. Copy line 19b. | | | | \$5,360.82 |
| | Multiply by 12 (the nu | imber of months in a year). | | | x 12 |
| | 20b. The result is your curr | ent monthly income for the year | for this part of the for | m | \$64,329.84 |
| | 20c. Copy the median fam | ily income for your state and siz | e of household from li | ne 16c. | \$51,317.00 |
| 21. | How do the lines compar- | e? | | | |
| | Line 20b is less than line commitment period is | ne 20c. Unless otherwise ordere 3 years. Go to Part 4. | d by the court, on the | top of page 1 of this form, check box 3, The | |
| | Line 20b is more than 4, The commitment pe | or equal to line 20c. Unless other of the control o | erwise ordered by the | court, on the top of page 1 of this form, check box | |
| Part 4 | : Sign Below | | | | |
| | By signing here, I decla | re under penalty of perjury that | the information on this | s statement and in any attachments is true and correct. | |
| | | 00 | and the second s | , | |
| | 🗶 /s/ Gregory Smi | th May S | × | | |
| | Signature of Debto | r1 | 5 | Signature of Debtor 2 | |
| | Date 1/5/2018 | _ | Г | Pate Pate | |
| | MM/DD/YYY | Ϋ | | MM/DD/YYYY | |
| | | NOT fill out or file Form 122C-2 out Form 122C-2 and file it with | | of that form, copy your current monthly income from line | ∍14 |

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| Debtor 1 Gregory | | Smith | Case number (if known) |
|---|---------------------------------|----------------------------|--|
| First Name | Middle Name | Last Name | |
| Part 4: Sign Below | | | |
| By signing here, under penalty | of perjury you declare that the | information on this staten | nent and in any attachments is true and correct. |
| /s/ Gregory Smith Signature of Debtor 1 | Ing la | x | ignature of Debtor 2 |
| Date 1/5/2018 MM/DD/YYYY | | D | ateMM/DD/YYYY |
| | | | |

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Smith, Gregory | Case No | |
|---|----------------|--|------------------------------------|
| *************************************** | Debtor(s) | 00010. | |
| | | Chapter. | Chapter13 |
| | VERIFI | CATION OF CREDITOR MATE | RIX |
| Tł knowledge | | fy that the attached list of creditors is true | e and correct to the best of their |
|)ate: | 1/5/2018 | /s/ Smith, Gregory Smith, Gregory Signature of Debto | J. G. |